

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

|                        |  |
|------------------------|--|
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| LAND OFFICE            |  |
| OPERATOR               |  |

|                                           |                              |
|-------------------------------------------|------------------------------|
| 5a. Indicate Type of Lease                |                              |
| State <input checked="" type="checkbox"/> | Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.              |                              |

API #30-025-29017

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT - (FORM C-101) FOR SUCH PROPOSALS.)

|                                                                                                                                                                                                          |                                   |                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|--------------------------------|
| CIL WELL <input checked="" type="checkbox"/>                                                                                                                                                             | GAS WELL <input type="checkbox"/> | OTHER <input type="checkbox"/> |
| Name of Operator<br>SHELL WESTERN E&P INC.                                                                                                                                                               |                                   |                                |
| Address of Operator<br>P. O. BOX 576, HOUSTON, TEXAS 77001 (WCK 4435)                                                                                                                                    |                                   |                                |
| Location of Well<br>UNIT LETTER <u>B</u> <u>210</u> FEET FROM THE <u>NORTH</u> LINE AND <u>1400</u> FEET FROM<br>THE <u>EAST</u> LINE, SECTION <u>32</u> TOWNSHIP <u>18-S</u> RANGE <u>38-E</u> N.M.P.M. |                                   |                                |

|                                                  |
|--------------------------------------------------|
| 7. Unit Agreement Name<br>N. HOBBS (G/SA) UNIT   |
| 8. Form of Lease Name<br>SECTION 32              |
| 9. Well No.<br>312                               |
| 10. Field and Pool, or Wholeness<br>HOBBS (G/SA) |
| 12. County<br>LEA                                |

|                                                             |
|-------------------------------------------------------------|
| 11. Elevation (Show whether DF, RT, GR, etc.)<br>3651.3' GL |
|-------------------------------------------------------------|

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

|                                                |                                                                    |                                                     |                                               |
|------------------------------------------------|--------------------------------------------------------------------|-----------------------------------------------------|-----------------------------------------------|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/>                          | REMEDIAL WORK <input type="checkbox"/>              | ALTERING CASING <input type="checkbox"/>      |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>                              | COMMENCE DRILLING OPER. <input type="checkbox"/>    | PLUG AND ABANDONMENT <input type="checkbox"/> |
| FULL OR ALTER CASING <input type="checkbox"/>  | OTHER <u>ZONE TEST FOR WSO</u> <input checked="" type="checkbox"/> | CASING TEST AND CEMENT JOB <input type="checkbox"/> | OTHER <input type="checkbox"/>                |

7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work.) SEE RULE 1103.

1. Pull production equipment.
2. Set RBP @ 4000' & pres tst to 500#. Reset RBP @ 4220'.
3. Install production equipment & return well to production for 1-2 weeks.
4. Pull production equipment.
5. Reset RBP to 4150' & pres tst to 500#.
6. Install production equipment & return well to production for 1-2 weeks.
7. Pull production equipment.
8. Reset RBP to 4100' & pres tst to 500#.
9. Install production equipment & return well to production for 1-2 weeks.
10. A WSO procedure will be determined based on these zone tst.

I, I hereby certify that the information above is true and complete to the best of my knowledge and belief.

|                                                          |                                               |                            |
|----------------------------------------------------------|-----------------------------------------------|----------------------------|
| SIGNED <u>A. J. FORE</u>                                 | TITLE <u>SUPERVISOR REG. &amp; PERMITTING</u> | DATE <u>APRIL 30, 1986</u> |
| ORIGINAL SIGNED BY JERRY SEXTON<br>DISTRICT I SUPERVISOR |                                               |                            |
| SIGNED BY <u>J. Sexton</u>                               | TITLE <u>DISTRICT I SUPERVISOR</u>            | DATE <u>MAY 5 - 1986</u>   |