

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs NM 88240
DISTRICT II
P.O. Drawer DD, Artesia, NM 88210
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-29026
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name N. HOBBS (G/SA) UNIT SECTION 33
8. Well No. 212
9. Pool name or Wildcat HOBBS (G/SA)

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.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> INJECTOR <input type="checkbox"/>	2. Name of Operator Shell Western E&P Inc.
3. Address of Operator P.O. Box 576, Houston, TX 77001 (wch 5237)	4. Well Location Unit Letter C : 205 Feet From The NORTH Line and 1420 Feet From The WEST Line Section 33 Township 18S Range 38E NMPM LEA County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3643' GR	

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: **ACD** ☒

12. 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.

4-04-94:

ACD SA PERFS 4029' - 4138' W/2500 GAL 15% HCL W/PENTOL "200" ACID + 5000 GAL 20% HCL + 6000#
ROCK SALT. RETD TO INJ.

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

SIGNATURE *J. Marcus Winder* TITLE TECH. MGR. - ASSET ADMIN. DATE 6/09/94

TYPE OR PRINT NAME A. J. DURRANI

TELEPHONE NO. 713/544-3797

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

JUN 14 1994