

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.
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 24
8. Well No. 312
9. Pool name or Wildcat HOBBS (G/SA)
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3668' GL

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	2. Name of Operator SHELL WESTERN E & P INC. (4431 WCK)
3. Address of Operator P.O. BOX 576, Houston, TX 77001-0576	4. Well Location Unit Letter B : 10 Feet From The North Line and 2630 Feet From The East Line Section 24 Township 18-S Range 37-E NMPM Lea County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3668' GL	

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: OAP & AT ☒

SUBSEQUENT REPORT OF:

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

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.

- 1) CO to 4220'.
- 2) Spot 168 gals 15 % HCl acid from 4207' up, using CIBP set @ 4200'.
- 3) Perf San Andres 4126' - 4195' w/ 2JSPF.
- 4) AT San Andres 4126' - 4195' w/ 1500 gals 15% HCl acid + 42 ball sealers, using pkr set @ 4100'.
- 5) RIH w/ prod equip and return well to production.

NOTE: NSL Order #R-7628

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

SIGNATURE W.F.N. KELLDORF TITLE STAFF PRODUCTION ENGINEER DATE 3/15/89
TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON TITLE DISTRICT I SUPERVISOR DATE MAR 21 1989
CONDITIONS OF APPROVAL, IF ANY:

100-100000-100000

RECEIVED

MAR 20 1989

OCD
HOBBS OFFICE