

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. <u>30-025-30308</u>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" 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. 433
9. Pool name or Wildcat HOBBS (G/SA)
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 360 1867

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 <input type="checkbox"/>	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 (surface/bottomhole) Unit Letter <u>I</u> <u>1847/1950</u> Feet From The <u>South</u> Line and <u>985/400</u> Feet From The <u>East</u> Line Section <u>33</u> Township <u>18-S</u> Range <u>38-E</u> NMPM <u>LEA</u> County <u></u>
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3631' 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: 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) POOH w/ prod equip.
- 2) CO to 4320'.
- 3) AT San Andres 4147' - 4290' w/ 2000 gals 15% HCl acid + 1000# rock salt, using pkr set @ 4104'.
- 4) TIH w/ prod equip and return to production.

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 3/17/89
(713) 870-3793 TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

MAR 21 1989

RECEIVED

MAR 20 1961

OCD
HOBBS OFFICE