

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.
30-025-31662

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name
N. HOBBS (G/SA) UNIT
SECTION 32

1. Type of Well:
OIL WELL GAS WELL OTHER

8. Well No.
144

2. Name of Operator
Shell Western E&P Inc.

9. Pool name or Wildcat
HOBBS (G/SA)

3. Address of Operator
P.O. Box 576 Houston, TX 77001-0576 (wck 523?)

4. Well Location
Unit Letter M : 786 Feet From The SOUTH Line and 1175 Feet From The WEST Line
Section 32 Township 18S Range 38E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3627.4' GR

11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <u>RAN 5-1/2 IN. CSG</u> <input checked="" type="checkbox"/>

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.

11-09 TO 11-10-93:

RAN 107 JTS 5-1/2 IN. 15.5# J-55 LT& CSG, FS @ 4400', FC @ 4355'. CMT'D CSG W/660 SX CLS C + 3% THRIFTYLITE + .25% CACL2 + .5#/SK CELLOSEAL FOLLOWED BY 150 SX CLS C + .8% CF-14A (FL LOSS) + .15% CF-2 + .1% THRIFTYLITE. DISPL W/103.6 BBLs BRINE WTR. BUMPED PLUG W/1400#. CIRC 38 SX CMT TO PIT. TOC @ SURF. FLOAT HELD OK. CMT IN PLACE @ 4:30 AM 11/10/93.

RIG REL @ 1:00 PM, 11/10/93.

NSL-3148

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

SIGNATURE J. Marcus Windsor TITLE TECH. MGR. - ASSET ADMIN. DATE 11/12/93

TYPE OR PRINT NAME A. J. DURRANI TELEPHONE NO. 713/544-3797

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

NOV 22 1993

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: