DISTRICTI P.O. Box 1980, Hobbs, NM \$8240 DISTRICTI P.O. Box 1980, Hobbs, NM \$8210 Santa Fe, New Mexico 87504-2088 DISTRICTI CIONALI CIONALI DISTRICTI CIONALI DISTRICTI CIONALI DISTRICTI CIONALI DISTRICTI CIONALI DISTRICTI CIONALI CILIA CIONALI CIONALI CIONALI CIONALI CIONALI CIONALI CIONALI CIONA	UNIT Y-TUBB-
DISTRICT III SUNDRY NOTICES AND REPORTS ON WELLS SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO ORLIGO RY OF PERMIT (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: ONE WILL ONE W	Vame UNIT Y-TUBB-
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOR, USE "APPLICATION FOR PERMIT" (PORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: OSS	UNIT Y-TUBB-
(DO NOT USE THIS FORM FOR PROPOSALS TO MILL OH TO DEFEN ON PLOT DIFFERENT RESERVOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well:	UNIT Y-TUBB-
1. Type of Well: ONE WELL WESTERN E & P INC. (4431 WCK) 3. Address of Operator P. O. BOX 576. Houston, TX 77001-0576 Well Location Unit Letter C: 660 Feet From The North Line and 1980 Feet From The Western Township 21-S Range 37-E NMFM LEA Soction 22 Township 21-S Range 37-E NMFM LEA 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF REMEDIAL WORK ALTERING CA TEMPORARILY ABANDON CHANGE PLANS 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 prowork) SEE RULE 1103. 2-18-89 thru 2-24-89: POOH w/ prod equip. Perf Tubb 5998' - 6048' w/ 1JSPF. AT Tubb 5998' - 6048' w. 1050 gals 15% NEFE Hcl acid + 32 ball sealers, using RBP and pkr. TIH w/ injects setting Guiberson Uni-VI pkr @ 5660'. Pres test to 500 psi for 30 min - held 0	Y-TUBB-
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 C: 660 Feet From The North Line and 1980 Feet From The Wester DF, RKB, RT, GR, etc.) 3416' GR 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3416' GR 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF REMEDIAL WORK ALTERING CASING TEST AND CEMENT JOB OTHER: OAP, AT / CTI 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed of gals 15% NEFE Hcl acid + 32 ball sealers, using RBP and pkr. TIH w/ injection of Gals 15% NEFE Hcl acid + 32 ball sealers, using RBP and pkr. TIH w/ injects acid for the complete complete the complete c	<u> </u>
3. Address of Operator P.O. BOX 576. Houston, TX 77001-0576. 4. Well Location Unit Letter C : 660 Feet From The North Line and 1980 Feet From The Well Location Volume Letter C : 660 Feet From The North Line and 1980 Feet From The Well Location Volume Letter C : 660 Feet From The North Line and 1980 Feet From The Well Location Volume Letter C : 660 Feet From The North Line and 1980 Feet From The Well Location (Show whether DF, RXB, RT, GR, etc.) 3416 GR 10. Elevation (Show whether DF, RXB, RT, GR, etc.) 3416 GR 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF SUBSEQUENT REPORT OF COMMENCE DRILLING OPNS. PLUG AND ABOUT COMMENCE DRILLING OPNS. OTHER: OAP, AT / CTI OTHER: OAP, AT Tubb 5998' - 6048' W, 1050 gals 15% NEFE Hcl acid + 32 ball sealers, using RBP and pkr. TIH w/ injection of the comment of th	<u> </u>
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Unit Letter C: 000 Feet From The Hot of Line and Feet From The Section 22 Township 21-S Range 37-E NMFM LEA 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3416 GR 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT O PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CA TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND AB PULL OR ALTER CASING OTHER: OAP, AT / CTI 12. Describe Proposed or Completed Operations (Clearly state all perinent details, and give perinent dates, including estimated date of starting any property of the property of the proposed of Completed Operations (Clearly state all perinent details, and give perinent dates, including estimated date of starting any property of the proposed of Completed Operations (Clearly state all perinent details, and give perinent dates, including estimated date of starting any property of the proposed of Completed Operations (Clearly state all perinent details, and give perinent dates, including estimated date of starting any property of the proposed of Completed Operations (Clearly state all perinent details, and give perinent dates, including estimated date of starting any property of the property of the perinent dates, including estimated date of starting any property of the perinent dates, including estimated date of starting any property of the perinent dates, including estimated date of starting any property of the perinent dates, including estimated date of starting any property of the perinent dates, including estimated date of starting any property of the perinent dates, including estimated date of starting any property of the perinent dates, including estimated date of starting any property of the perinent dates, including estimated date of starting any property of the perinent dates.	
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.	1 7 1989
SKONATURE Afformation for W.F.N. KELLDORF TITLE STAFF PRODUCTION ENGINEER DATE	
TYPE OR PRINT NAME	EMU.
(This apace for State Use) ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR	
APPROVED BY DATE	R 2 4 1
CONDITIONS OF APPROVAL, IF ANY:	R 2 4 1
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