

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
1625 N. French Dr.
Hobbs, NM 88240

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name
2. Name of Operator CAMPBELL & HEDRICK		7. If Unit or CA, Agreement Designation
3. Address and Telephone No. P. O. BOX 401, MIDLAND, TEXAS 79702 915-684-4393		8. Well Name and No. HARDY #5
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 330' from South line, 1650' from East line Sec. 19, 21S, 37E		9. API Well No. 30-025-06677
		10. Field and Pool, or Exploratory Area PADDOCK-Blinebry
		11. County or Parish, State LEA

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other _____	<input type="checkbox"/> Dispose Water

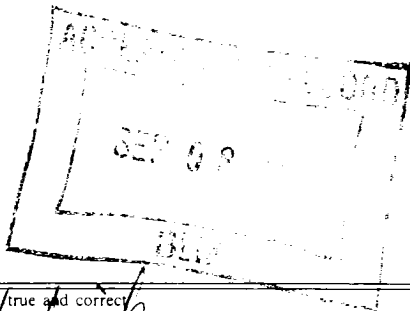
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Re: Administrative Order DHC-2660

3/20/00--Pull rods from Paddock zone, unlatch from parallel string anchor. Pull short string and lay down. Set B.O.P. unlatch from packer, pull out of hole, remove seal assembly, run 158 jts 2 3/8 J55 tubing to pump DHC zones from 5567. Now pumping both zones into Paddock battery.

SUBJECT TO
LIKE APPROVAL
BY STATE



14. I hereby certify that the foregoing is true and correct.

Signed: F. Hedrick Title: OPERATOR Date: 8/25/00

(This space for Federal or State office use)

Approved by: _____ Title: _____ Date: _____

Conditions of approval, if any: _____

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.