

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons
P.O. Box 1980
Hobbs, NM 88241

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

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	5. Lease Designation and Serial No. NMLC064427
2. Name of Operator John H. Hendrix Corporation	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P. O. Box 3040, Midland, TX 79702-3040 (915) 684-6631	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980 FNL & 480' FEL, Unit H, Sec. 15, T22S, R37E	8. Well Name and No. <u>15</u> Elliott B No. <u>3</u> <u>5</u>
	9. API Well No. 30-025-34120
	10. Field and Pool, or Exploratory Area Drinkard (19190)
	11. County or Parish, State Lea County, NM

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

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

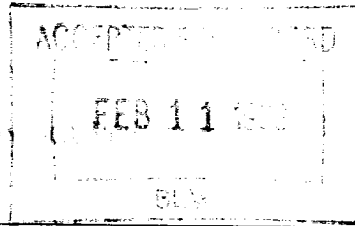
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

1/12/98 Perf. Abo 6654 - 7336'. Acidized w/ 2500 gals. 15% NE acid. Swab dry. No oil or gas shows.

1/14/98 Set RBP at 6640'.

1/15/98 Perf. Drinkard 6330 - 6538'. Acidized with 4000 gals. 15% NEFE. Testing well.



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

Signed Ronnie A. [Signature] Title Vice President Date 02/02/98

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any: _____