

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720

District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170

District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

HOBBS OCD
OCT 30 2013
RECEIVED

State of New Mexico
Energy Minerals and Natural Resources
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-101
Revised July 18, 2013

☐ AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator Name and Address John H. Hendrix Corporation P.O. Box 3040 Midland, TX 79702-3040		² OGRID Number 012024
		³ API Number 30-025-11121
⁴ Property Code 005206	⁵ Property Name New Mexico AB State	⁶ Well No. 1

7. Surface Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County
H	16	24S	37E		1980	NORTH	660	EAST	LEA

8. Proposed Bottom Hole Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County

9. Pool Information

Pool Name Fowler, Upper Yeso	Pool Code 26680
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Additional Well Information

¹¹ Work Type P; A	¹² Well Type O	¹³ Cable/Rotary	¹⁴ Lease Type P	¹⁵ Ground Level Elevation 3280' RDB; 3256' GL
¹⁶ Multiple	¹⁷ Proposed Depth Plug Back to 5800-5900'	¹⁸ Formation Fowler, Upper Yeso 5300-5700'	¹⁹ Contractor	²⁰ Spud Date
Depth to Ground water - 85-100'		Distance from nearest fresh water well >1 mile (NMSEO)		Distance to nearest surface water NA

☒ We will be using a closed-loop system in lieu of lined pits

21. Proposed Casing and Cement Program

Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
NC						

Casing/Cement Program: Additional Comments

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22. Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
Reddy - Well Service BOP	3000#	3000#	Reddy

²³ I hereby certify that the information given above is true and complete to the best of my knowledge and belief.

I further certify that I have complied with 19.15.14.9 (A) NMAC ☐ and/or 19.15.14.9 (B) NMAC ☐, if applicable.

Signature: *Carolyn Doran Haynes*

Printed name: Carolyn Doran Haynes

Title: Engineer

E-mail Address: cdoranhaynes@jhhc.org

Date: 10-29-2013

Phone: 432-684-6631

OIL CONSERVATION DIVISION

Approved By:

Title:

Approved Date: 10/30/13

Expiration Date: 10/30/15

Conditions of Approval Attached

OCT 30 2013