Submit 1 Copy To Appropriate District Office District I – (575) 393-6161	State of New Mexico Energy, Minerals and Natural Resources		Form C-103 Revised July 18, 2013	
1625 N. French Dr., Hobbs NM 88249 District II – (575) 748 128 11 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		WELL API NO. 30-025-25321	
District III – (505) 334-6478 1000 Rio Brazos Rd., Aziec, MM 87410 3 S District IV – (505) 476-3460	1220 South St. Francis Dr. Santa Fe, NM 87505		5. Indicate Type of Lease STATE ☐ FEE ☒	
1220 S. St. Francis T. Santa Fe NM 87505			6. State Oil & Gas Lease No.	
SUNDRY NOTICES AND REPORTS ON WEL (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101)		UG BACK TO A	7. Lease Name or Unit Agreement Name Hodge	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			8. Well Number 1	
Name of Operator Jimmy P Hodge dba JPH Oil Producers		1	9. OGRID Number	
3. Address of Operator P.O. Box 565	V 10		10. Pool name or Wildcat Trinity Wolfcamp	
4. Well Location				
Unit Letter_P_:_660_feet from Section 28	the South line and810fe Township 12S	et from the East lin Range	ne 38E NMPM Lea	County
	1. Elevation (Show whether DR 3812 GR			County
10.01.1.1			D 01 D	
12. Check App	ropriate Box to Indicate N			
TEMPORARILY ABANDON CIPULL OR ALTER CASING MOOWNHOLE COMMINGLE	NTION TO: LUG AND ABANDON HANGE PLANS ULTIPLE COMPL	SUBSEQUENT REPORT OF: REMEDIAL WORK		
CLOSED-LOOP SYSTEM OTHER:		OTHER:	production as wolfcamp zone	\boxtimes
 Describe proposed or completed of starting any proposed work). proposed completion or recomp 	SEE RULE 19.15.7.14 NMA	pertinent details, a		
Work Began 5/8/1998				
Rig up wireline set CIBP at 11,000' with cement on top of CIBP – come out of ho		- come out of hol	e – set another CIBP at 9,800' with 3	35' of
		560' to 0565' &	root with 2 000 collars 15% acid r	en rada fr
Go in hole with perforating guns & perf pump – start well pumping - pump for 2 cover.				
Work stopped 5/30/1998				
Spud Date:	Rig Release D	ate:		
I hereby certify that the information above	ve is true and complete to the b	est of my knowled	ge and belief.	
1-11	1		2	
SIGNATURE	dge TITLE &		DATE 9-11	-1998
Type or print name For State Use Only	Hodge E-mail addres	s:	PHONE: 575-	396-2104
APPROVED BY:	Accepted for R	ecord Only	DATE	
Conditions of Approval (if any):	MSBrown			