Submit 3 Copies To Appropriate District	State of New Mexico		Form C-103
Office <u>District I</u>	Energy, Minerals and Natural Resources		June 19, 2008
1625 N. French Dr., Hobbs, NM 88240 District II			WELL API NO. 30-025-10255
1301 W Grand Ave , Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease
<u>District III</u> 1000 Rio Brazos Rd, Aztec, NM 87410	1220 South St. Francis Dr.		STATE FEE
District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr , Santa Fe, NM 87505			
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			Hinton Bottom 2
PROPOSALS.)			Hinton Battery 2 8. Well Number 10
1. Type of Well: Oil Well Gas Well Other			
2. Name of Operator John H. Hendrix Corporation			9. OGRID Number 012024 /
3. Address of Operator			10. Pool name or Wildcat
P. O. Box 3040, Midland, TX 79702-3040		Blinebry and Tubb	
4. Well Location			
Unit Letter D:660feet from theNorthline and330feet from theWest line			
Section 1325 Township 22S Range 37E NMPM Lea County			
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3336' GL			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASI			
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRIL			
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB			
DOWNHOLE COMMINGLE	_		
071150 5 17101 1			
OTHER: Extend TA Status for 6 Months OTHER: OTHER: OTHER: IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII			
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach well and of proposed completion or recompletion.			
or recompletion.			FEB 0 8 2012
			450 0 9 7015
THE ICA DECLIEST EXTEND TO	V	ECE CACDIC AND	
THIS IS A REQUEST EXTEND TA STATUS FOR 6 MONTHS TO TEST CASING AND EVALUATED BORE FOR RETURN TO PRODUCTION AS DOWN-HOLE-COMMINGLE BLINEBRY AND TUBB COMPLETION. PAPERWORK TO FACILITATE THE DICK WILL BE SUBMITTED FROM A FEAR PRODUCTION AS TO PRODUCT ON A FEAR PRODUCT OF THE DICK WILL BE SUBMITTED FROM A FEAR PRODUCT OF THE DICK WILL BE SUBMITTED			
THE DHC WILL BE SUBMITTED UPON AFE APPROVAL FROM WORKING INTEREST OWNERSHIP.			
WILL TEST WELLBORE TO 500# UPON APPROVAL AND TEST WITNESS APPOINTMENT,			
Condition of Approval: Notify OCD Hobbs			
office 24 hours prior to running MIT Test & Chart Spud Date: Kig Kelease Date:			
Spud Date: Kig Kelease Date:			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE and Dona tome TITLE Engineer DATE 02/07/12			
SIGNATURE / DATE 02/07/12 Engineer DATE 02/07/12			
Type or print name . <u>Carolyn Doran Haynes</u> . E-mail address: <u>cdoranhaynes@jhhc.org</u> PHONE: 432-684-6631			
For State Use Only			
APPROVED BY: DATE 2-8-2017			
Conditions of Approval (if any):			
Conditions of Approvia (it mits).			