Submit 3 Copies To Appropriate District	State of New Mexico	Form C-103
Office District I	Energy, Minerals and Natural Resources	June 19, 2008
1625 N. French Dr., Hobbs, NM 88240 District II		WELL API NO. 30-025-26195
1301 W Grand Ave, Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
District III 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		B-934
SUNDRY NOTICES AND REPORTS ON WELLS (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		7. Lease Name or Unit Agreement Name
		New Mexico "AB" State
PROPOSALS.) 1. Type of Well: Oil Well ☑ Gas Well ☐ Other		8. Well Number 4
2. Name of Operator	Gas well Utiler /	9. OGRID Number 012024 /
John H. Hendrix Corporation		7. OGRID Number 012024
3. Address of Operator		10. Pool name or Wildcat
P. O. Box 3040, Midland, T	X 79702-3040	Fowler – Upper Yeso
4. Well Location		
Unit Letter A : 660 feet from the North line and 660 feet from the East line		
Section 16	Township 24S Range 37E	NMPM Lea County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3284' DF and 3272' GRL		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON 🛛	_	ILLING OPNS.□ P AND A □
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEMEN	IT JOB
DOWNHOLE COMMINGLE		
OTHER: Extend TA Status for	l year 🖂 OTHER:	П
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent details details details.		
of starting any proposed wo	rk). SEE RULE 1103. For Multiple Completions: A	ttach wellbore diagram of proposed completion
or recompletion.	'	FEB 0 8 2012
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	V	APAPII (PA
THIS IS A REQUEST EXTEND TA STATUS FOR ONE YEAR TO EVALUATE WELL FOR RECOMPRESENTED TO PRODUCTION OR PLUG AND ABANDON.		
WILL TEST WELLDONE TO 500# LIDON ADDROVAL AND TEST WITNESS ADDODGENERATE		
WILL TEST WELLBORE TO 500# UPON APPROVAL AND TEST WITNESS APPOINTMENT,		
Condition	of Approval : Notify OCD Habba	
	of Approval : Notify OCD Hobbs lours prior to running MIT Test & Chart	
Spud Date.	Kig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE Wish Down frame TITLE Engineer DATE 02/07/12		
SIGNATURE // Burn Hayner-TITLE Engineer DATE 02/07/12		
Type or print name . Carolyn Doran Haynes . E-mail address: cdoranhaynes@jhhc.org PHONE: 432-684-6631		
For State Use Only		
APPROVED BY TITLE SANT MAY DATE 2-8-2012		
APPROVED BY: Conditions of Approval (if any): DATE -8-20/2		
Conditions of Approvation any).		