

Submit 3 Copies To Appropriate District Office  
District I  
1625 N French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
June 19, 2008

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 PROPOSALS.)		WELL API NO. 30-025-06784 ✓
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> <b>HOBBS OCD</b>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> ✓
2. Name of Operator John H. Hendrix Corporation ✓ <b>OCT 05 2012</b>		6. State Oil & Gas Lease No.
3. Address of Operator P. O. Box 3040, Midland, TX 79702-3040		7. Lease Name or Unit Agreement Name Sarkeys A ✓
4. Well Location Unit Letter <u>G</u> : 1980 feet from the <u>North</u> line and 1980 feet from the <u>East</u> line Section <u>26</u> Township <u>21S</u> Range <u>37E</u> NMPM Lea County		8. Well Number <u>1</u> ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3383' GR		9. OGRID Number <u>012024</u> ✓
		10. Pool name or Wildcat <u>DHC Blinebry Drinkard</u> ✓

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input checked="" type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <input type="checkbox"/>

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

This is a request to Down Hole Commingle the Blinebry Oil & Gas, Tubb Oil & Gas and Drinkard producing zones in the subject well. See supporting data on attached sheet.

Presently the subject well is DHC Blinebry and Drinkard under Order No. DHC-287, approved August 9, 1979.

Spud Date:

Rig Release Date:

**DHC-HOB-501**

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

SIGNATURE Carolyn Doran Haynes TITLE Engineer DATE 10/05/12

Type or print name Carolyn Doran Haynes E-mail address: cdoranhaynes@jhhc.org PHONE: 432-684-6631

**For State Use Only**

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE OCT 05 2012  
Conditions of Approval (if any):

## **SARKEYS A #1**

### **Unit Letter G – 1980' FNL & 1980' FEL Sec 26, T21S, R37E, Lea County, NM API # 30-025-06784**

1. Division Order that established pre-approved pools: Order No. R-11363
2. Pools to be commingled – Blinebry Oil & Gas (6660) and Tubb Oil & Gas (60240) and Drinkard Pool (19190).
3. New Tubb Oil & Gas Perfs – 6145-6280'  
Re-perf Blinebry Oil & Gas – 5560-5600' and Existing Perfs – 5722-5857'  
Existing Drinkard Perfs – 6450-6566'
4. All zones are intermediate crude and commingling will not reduce the value of the production.
5. Ownership between pools in this wellbore is identical.
6. Current or Anticipated production:

Blinebry Oil & Gas	2 BOPD	40 MCFPD
Tubb Oil & Gas	2 BOPD	40 MCFPD
Drinkard Pool	1 BOPD	20 MCFPD
Total	5 BOPD	100 MCFPD

7. The proposed allocation to be as follows

	<u>Oil %</u>	<u>Gas%</u>
Blinebry Oil & Gas	40%	40%
Tubb Oil & Gas	40%	40%
Drinkard Pool	20%	20%
Total	100%	100%

If further tests show a significant difference in allocation percentages, it will be revised.

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**HOBBS OCD**

**OCT 05 2012**

**RECEIVED**

Form C-102  
Revised October 12, 2005  
Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies

☐ AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

<sup>1</sup> API Number 30-025-06784	<sup>2</sup> Pool Code 6660	<sup>3</sup> Pool Name Blinebry Oil & Gas
<sup>4</sup> Property Code 005218	<sup>5</sup> Property Name Sarkeys A	<sup>6</sup> Well Number 1
<sup>7</sup> OGRID No. 012024	<sup>8</sup> Operator Name John H. Hendrix Corporation	<sup>9</sup> Elevation 3383' GL

**<sup>10</sup> Surface Location**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
G	26	21S	37E		1980	North	1980	East	Lea

**<sup>11</sup> Bottom Hole Location If Different From Surface**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

<sup>12</sup> Dedicated Acres 40	<sup>13</sup> Joint or Infill	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No. <b>DHC-HOB-501</b>
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

<div style="text-align: center;"> </div>	<b><sup>17</sup> OPERATOR CERTIFICATION</b> I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division. Signature <u>Carolyn Doran Haynes</u> Date <u>10/5/12</u> Carolyn Doran Haynes Printed Name	
	<b><sup>18</sup> SURVEYOR CERTIFICATION</b> I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief Date of Survey _____ Signature and Seal of Professional Surveyor _____ Certificate Number _____	

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WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> API Number 30-025-06784	<sup>2</sup> Pool Code 19190	<sup>3</sup> Pool Name Drinkard Pool
<sup>4</sup> Property Code 005218	<sup>5</sup> Property Name Sarkeys A	<sup>6</sup> Well Number 1
<sup>7</sup> OGRID No. 012024	<sup>8</sup> Operator Name John H. Hendrix Corporation	<sup>9</sup> Elevation 3383' GL

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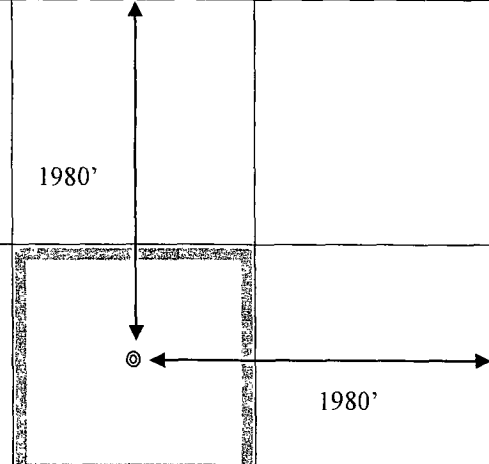
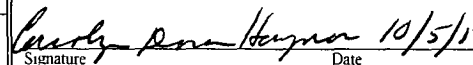
UL or lot no. G	Section 26	Township 21S	Range 37E	Lot Idn	Feet from the 1980	North/South line North	Feet from the 1980	East/West line East	County Lea
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WELL LOCATION AND ACREAGE DEDICATION RECEIVED

<sup>1</sup> API Number 30-025-06784	<sup>2</sup> Pool Code 60240	<sup>3</sup> Pool Name Tubb Oil & Gas
<sup>4</sup> Property Code 005218	<sup>5</sup> Property Name Sarkeys A	<sup>6</sup> Well Number 1
<sup>7</sup> OGRID No. 012024	<sup>8</sup> Operator Name John H. Hendrix Corporation	<sup>9</sup> Elevation 3383' GL

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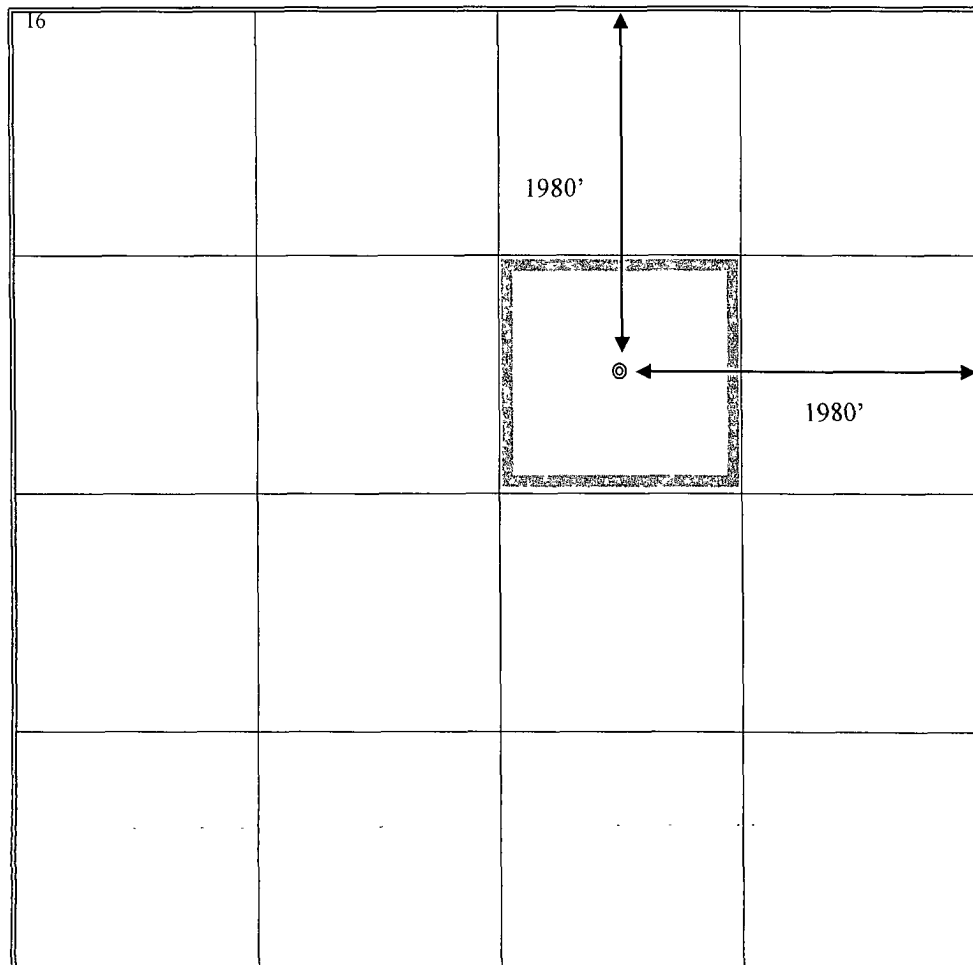
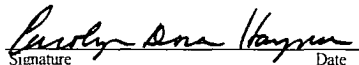
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