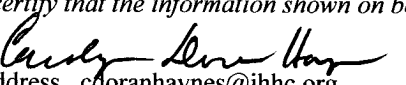


| | | | | | | | | | | |
|--|-----------------|---|--|---|--------------|---------------------------------------|-------------------------------|--|------------|---------------|
| Submit To Appropriate District Office Two Copies District I 1625 N French Dr., Hobbs, NM 88240 District II 1301 W Grand Avenue, 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 <div style="position: relative; height: 100px;"> <div style="position: absolute; top: 0; left: 0; font-size: 40px; opacity: 0.5;">RECEIVED</div> <div style="position: absolute; top: 0; left: 50%; transform: translate(-50%, -50%); font-size: 24px;">2010</div> <div style="position: absolute; top: 0; left: 10%; font-size: 24px;">HOBBS</div> <div style="position: absolute; top: 0; left: 20%; font-size: 24px;">OCD</div> </div> Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505 | | | | Form C-105 July 17, 2008 | | | | |
| WELL COMPLETION OR RECOMPLETION REPORT AND LOG | | | | | | | | | | |
| 4. Reason for filing: <input checked="" type="checkbox"/> COMPLETION REPORT (Fill in boxes #1 through #31 for State and Fee wells only) <input checked="" type="checkbox"/> C-144 CLOSURE ATTACHMENT (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33; attach this and the plat to the C-144 closure report in accordance with 19.15.17 13.K NMAC) | | | | 1. WELL API NO. 30-025-22253 2. Type of Lease <input type="checkbox"/> STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN 3. State Oil & Gas Lease No. | | | | | | |
| 7. Type of Completion: <input type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input checked="" type="checkbox"/> DIFFERENT RESERVOIR <input checked="" type="checkbox"/> OTHER DHC-HOB - 0347 Blinebry, Tubb & Drinkard | | | | 5. Lease Name or Unit Agreement Name Lee 6. Well Number: 2 | | | | | | |
| 8. Name of Operator John H. Hendrix Corporation 10. Address of Operator P. O. Box 3040, Midland, TX 79702-3040 | | | | 9. OGRID 012024 11. Pool name or Wildcat Blinebry Oil & Gas (6660) | | | | | | |
| 12. Location | Unit Ltr | Section | Township | Range | Lot | Feet from the | N/S Line | Feet from the | E/W Line | County |
| Surface: | P | 23 | 22S | 37E | | 660 | SOUTH | 660 | EAST | Lea |
| BH: | | | | | | | | | | |
| 13. Date Spudded | | 14. Date T.D. Reached | | 15. Date Rig Released | | 16. Date Completed (Ready to Produce) | | 17. Elevations (DF and RKB, RT, GR, etc.) 3315' GR | | |
| 18. Total Measured Depth of Well 7735' | | 19. Plug Back Measured Depth PB 7472'; CIBP@7240' Fill@6330' | | 20. Was Directional Survey Made? | | 21. Type Electric and Other Logs Run | | | | |
| 22. Producing Interval(s), of this completion - Top, Bottom, Name 5444-5881' Blinebry Oil & Gas | | | | | | | | | | |
| 23 CASING RECORD (Report all strings set in well) | | | | | | | | | | |
| CASING SIZE | | WEIGHT LB./FT. | | DEPTH SET | | HOLE SIZE | | CEMENTING RECORD | | AMOUNT PULLED |
| NC | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 24 LINER RECORD | | | | | | | | | | |
| SIZE | TOP | BOTTOM | SACKS CEMENT | | SCREEN | | 25. TUBING RECORD | | | |
| | | | | | | | SIZE | DEPTH SET | PACKER SET | |
| | | | | | | | 2 3/8" | 6330' | | |
| 26. Perforation record (interval, size, and number) 5796', 5803', 5813', 5824', 5850', 5856', 5871', 5881. 8 additional holes | | | | | | | | | | |
| 27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. | | | | | | | | | | |
| DEPTH INTERVAL | | | | | | | AMOUNT AND KIND MATERIAL USED | | | |
| 5444-5881' | | | | | | | 2500 gal acid 15% nefe HCl | | | |
| | | | | | | | (acidized Blinebry and Tubb) | | | |
| | | | | | | | | | | |
| 28. PRODUCTION | | | | | | | | | | |
| Date First Production | | Production Method (Flowing, gas lift, pumping - Size and type pump) | | | | Well Status (Prod. or Shut-in) | | | | |
| 3/21/10 | | Pumping 2" x 1 1/4" x 16' | | | | Prod | | | | |
| Date of Test | Hours Tested | Choke Size | Prod'n For Test Period 24 hr | Oil - Bbl | Gas - MCF | Water - Bbl | Gas - Oil Ratio | | | |
| 3/28/10 | 24 | | | 6 | 54 | 1 | | | | |
| Flow Tubing Press. | Casing Pressure | Calculated 24-Hour Rate | Oil - Bbl. | Gas - MCF | Water - Bbl. | Oil Gravity - API - (Corr.) | | | | |
| | 35# | | | | | | | | | |
| 29. Disposition of Gas (Sold, used for fuel, vented, etc.) | | | | | | | 30. Test Witnessed By | | | |
| sold | | | | | | | Raul Lopez | | | |
| 31. List Attachments | | | | | | | | | | |
| 32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit. | | | | | | | | | | |
| 33. If an on-site burial was used at the well, report the exact location of the on-site burial: | | | | | | | | | | |
| Latitude _____ Longitude _____ NAD 1927 1983 | | | | | | | | | | |
| I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief | | | | | | | | | | |
| Signature  | | | Printed Name Carolyn Doran Haynes Title Engineer | | | Date 4/16/10 | | | | |
| E-mail Address cdoranhaynes@jhhc.org | | | | | | | | | | |