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NEW MEXICO OIL CONSERVATION COMMISSION

MAY 28 11 47 AM '69

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State ☐ Fee ☒

5. State Oil & Gas Lease No.

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 PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator JOHN H. HENDRIX	8. Farm or Lease Name A.L. Christmas "C"
3. Address of Operator 316 Central Bldg., Midland, Texas 79701	9. Well No. 1
4. Location of Well UNIT LETTER J 1980 FEET FROM THE South LINE AND 1650 FEET FROM THE East LINE, SECTION 21 TOWNSHIP 22 South RANGE 36 East NMPM.	10. Field and Pool, or Wildcat South Eunice
15. Elevation (Show whether DF, RT, GR, etc.) 3525 DF	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:
REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

17. 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.

PROPOSED REMEDIAL WORK

- (1) Pull rods and tubing and set CIBP @3660'.
- (2) Perforate W/ 1 JSPP @3552, 3557, 3580, 3584, 3589, 3599, 3603, 3637
- (3) Acidize W/1500 gallons 15% LSTNE Acid and Fracture above perforations with 20,000 gallons water and 20,000 lbs 20-40 mesh sand
- (4) Swab to recover load water and place on test.

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

SIGNED John H. Hendrix

TITLE Owner & Operator

DATE 5/27/69

APPROVED BY [Signature]

TITLE [Signature]

DATE 5/27/69

CONDITIONS OF APPROVAL, IF ANY: