Submit 3 Copies To Appropriate District  Office  State of Nev. I		Form C-103 Revised March 25, 1999
District 1 1625 N. French Dr., Hobbs, NM 87240		WELL API NO.
District II 811 South First, Artesia, NM 87210 OIL CONSERVATION DIVISION		3002510248 5. Indicate Type of Lease
District III 2040 South Pacheco		STATE FEE S
District IV 2040 South Pacheco, Santa Fe, NM 87505  Santa Fe, NM 87505		6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WEL	LS	7. Lease Name or Unit Agreement Name:
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101	PLUG BACK TO A ) FOR SUCH	0
PROPOSALS.)	, , , , , , , , , , , , , , , , , , , ,	PADDOCK UNIT
1. Type of Well: Oil Well  Gas Well  Other		
2. Name of Operator	1	3. Well No. 60
John H. Henorix, Conp 3. Address of Operator		P. Pool name or Wildcat
P. O. Box 910 Eunice, n.m.	88231	PADDOCK
Unit Letter B: 660 feet from the North line and 1980 feet from the L-157 line		
Section /2 Township 225	Range 37 =	NMPM County LeA
10. Elevation (Show whether	DR, RKB, RT, GR, etc.)	
11. Check Appropriate Box to Indicate	Nature of Notice, Re	eport or Other Data
NOTICE OF INTENTION TO:	SUBSI	EQUENT REPORT OF:
PERFORM REMEDIAL WORK  PLUG AND ABANDON	REMEDIAL WORK	☐ ALTERING CASING ☐
TEMPORARILY ABANDON	COMMENCE DRILL	ING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB	
OTHER:	OTHER: CAS	na Internity Test
12. 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 recompilation.		
TESTED CASING TO SOOF FOR 30 MINUTES WITH 5# LEAK-OFF. ORIGINAL CHART		
DOIGINAL CHART		
With 3 & Lease OFF. OR		
encloser.		
Mondonnent Expires 5/24/2005		
<b>₽</b> €₩3₽	eonment Expired	<u> 5/24/2005.</u>
	(	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE D'ACTIVIN L. BULLOWSTILE PROD. Supt. DATE 5/24/00		
Type or print name MANVIN L. BURROWS Telephone No. 394-2649		
(This space for State use)		
	E	DATE PARE
Conditions of approval, if any:		700

