

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

API NO. (assigned by OCD on New Wells)

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☐

RE-ENTER ☐

DEEPEN ☐

PLUG BACK ☒

b. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER ☐

SINGLE
ZONE ☐

MULTIPLE
ZONE ☐

2. Name of Operator

John H. Hendrix Corporation

3. Address of Operator

223 W. Wall, Suite 525, Midland, TX 79701

7. Lease Name or Unit Agreement Name

Parks "A"

8. Well No.

3

9. Pool name or Wildcat

Blinebry

4. Well Location

Unit Letter P : 660 Feet From The South Line and 660 Feet From The East Line

Section 14 Township 22-S Range 37-E NMPM Lea County

10. Proposed Depth

5900'

11. Formation

Blinebry

12. Rotary or C.T.

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13. Elevations (Show whether DF, RT, GR, etc.)

3333' GR

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

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16. Approx. Date Work will start

1-12-89

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
		NA			

1. Set BP @ 6800' blanking off Wantz Abo.
2. Set BP @ 6200' blanking off Drinkard.
3. Perforate selected Blinebry intervals.
4. Acidize and test.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE Ronnie H. Westbrook TITLE Vice-President DATE 1-4-89

TYPE OR PRINT NAME Ronnie H. Westbrook

TELEPHONE NO. (915) 684-6631

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JAN 6 9 1989

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator John H. Hendrix Corporation			Lease Parks A		Well No. 3
Unit Letter p	Section 14	Township 22-S	Range 37-E	County NMPM	Lea
Actual Footage Location of Well: 660' feet from the south line and 660' feet from the east line					
Ground level Elev. 3333 GR	Producing Formation Blinebry		Pool Blinebry Oil		Dedicated Acreage: 40 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.

2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?

☐ Yes

☐ No

If answer is "yes" type of consolidation

If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.

OPERATOR CERTIFICATION

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

Signature

Ronnie H. Westbrook

Printed Name

Ronnie H. Westbrook

Position

Vice-President

Company

John H. Hendrix Corp.

Date

1-04-88

SURVEYOR CERTIFICATION

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 knowledge and belief.

Date Surveyed

Signature & Seal of
Professional Surveyor

Certificate No.

