

Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

5. Lease Designation and Serial No.

NM
NMLC 0557257

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

John H. Hendrix Corporation

3. Address and Telephone No

223 W. Wall, Suite 525, Midland, TX 79701 (915) 684-6631

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

660' FNL & 1980' FEL Sec. 15, T22S - R37E

8. Well Name and No

Elliott B-15 No. 1

9. API Well No.

300251029400S1

10. Field and Pool, or Exploratory Area

Drinkard

11. County or Parish, State

Lea County, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other TA	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work)*

In response to your letter of February 1, 1994, please be advised that we request approval to temporarily abandon this well. It is being held for a Tubb recompletion. We will perform a casing integrity test within 30 days.

*agm
ok for TA*

14. I hereby certify that the foregoing is true and correct

Signed

Ronnie H. Westbrook

Title

Vice-President

Date

3/23/94

(This space for Federal or State office use)

Approved by

(ORIG. SGD.) JOE G. LANA

Title

DETAILED ENGINEER

Date

4/13/94

Conditions of approval, if any:

see attached

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

MINIMUM REQUIREMENTS FOR CASING INTEGRITY TESTING OF WELLS
ON FEDERAL LEASES IN THE CARLSBAD RESOURCE AREA

1. Contact the appropriate BLM office at least 24 hours prior to the scheduled test.

NOTE: A BLM technician must be present to witness all casing integrity tests.

2. A retrievable bridge plug or packer shall be set a maximum of fifty (50) feet above any open perforations.
3. All downhole production equipment (tubing, rods, etc.) must be removed from the casing if they are not isolated by a packer.
4. The casing must be filled with fluid and pressure tested to 500 PSI. Further, the casing must be capable of holding this pressure for at least 30 minutes with a 10% allowable leak-off (ie., down to 450 PSI).
5. Wells that successfully pass the casing integrity test will be approved for Temporary Abandonment status for a period of 12 months provided that the operator submits a subsequent Sundry Notice requesting TA approval, and attaches a copy of The pressure test chart for the tested well.