Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

Revised 1-1-89

DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION P.O. Box 2088		WELL API NO. 30-025-023896		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088		5. Indicate Type of Lease STATE		
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			6. 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.)			7. Lease Name or Unit Agreement Name	
1. Type of Well: Oil GAS WELL Y WELL OTHER			CHRISTMAS	
2. Name of Operator CAMPBELL & HEDRICK			8. Well No.	
3. Address of Operator P. O. BOX 401, MIDLAND, TEXAS 79702			9. Pool name or Wildcat EUMONT YATES SEVEN RIVERS	
4. Well Location	Feet From The SOUTH			
17				LEA County
Section 1.7 Township 22S Range 37E NMPM LEA County 10. Elevation (Show whether DF, RKB, RT, GR, etc.)				
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REP				
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT				
PULL OR ALTER CASING CASING TEST AND CE				اس
OTHER:	U	OTHER:		
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. 9/1/00 Pull rods and pump. Tag bottom, tally tubing out of hole. Pick up work string and run to 3460, top perf, with perf clean tool. Treat to bottom perf, 3786, with 247 bbl KCl water. Rate 2.6 BPM, pressure 2220 to 2840. Acidize from bottom up with 2000 gal 15% HCl. Rate 2.4-2.7 BPM, pressure 2200-2600 psi. Circulate hole clean. Pull and ladown work string. Run tubing. Swab. Run pump and rods to 3750'.				
I hereby certify that the information shove is true SIGNATURE TYPE OR PRINT NAME O. F. HED	<u>uk</u>	OPERATOR		9/18/00 DNE NO. 915-684-4
(This space for State Use)			-	1-171
APPROVED BY	m	LE	DATE —	<i>j</i> -V:

CONDITIONS OF AFFROVAL, IF ANY: