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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

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

Form C-101
Revised 1-1-89

| API NO. (assigned by OCD on New Wells) |
| 3C-C25-24292 |

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 ☐

7. Lease Name or Unit Agreement Name
Cossatot "C"

2. Name of Operator
John H. Hendrix Corporation

8. Well No.
3

3. Address of Operator
223 W. Wall, Suite 525, Midland, TX   79701

9. Pool name or Wildcat
Paddock

4. Well Location
Unit Letter   J   :   1650   Feet From The   South   Line and   2210   Feet From The   East   Line

Section   24   Township   22S   Range   37E   NMPM   Lea   County

10. Proposed Depth	11. Formation	12. Rotary or C.T.
--	Paddock	--

13. Elevations (Show whether DF, RT, GR, etc.)	14. Kind & Status Plug. Bond	15. Drilling Contractor	16. Approx. Date Work will start
3312.6' GR	Blanket	-	3/25/90

17.   PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
11"	8-5/8"	24	1134	450	Surface
7-7/8"	5-1/2"	15.5	7430	645	3250

1. POH w/ tbg.
2. Set RBP at 7100' blanking off Wantz Granite Wash.
3. Set RBP at 6150' blanking off Brunson-Drinkard Abo, South.
4. Spot acid fr. 5400' to 5300'.
5. Perforate 5359 - 5363' w/ 2 JSPF.
6. Acidize w/ 3000 gals.
7. 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 _John H Hendrix_   TITLE _President_   DATE _3/8/90_

TYPE OR PRINT NAME   John H. Hendrix   (915) TELEPHONE NO. 684-6631

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

MAR 13 1990

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: