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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. 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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name	
2. Name of Operator John H. Hendrix		8. Farm or Lease Name Cossatot "C"	
3. Address of Operator 403 Wall Towers West, Midland, Texas 79701		9. Well No. 3	
4. Location of Well UNIT LETTER J 1650 FEET FROM THE South LINE AND 2210 FEET FROM THE East LINE, SECTION 24 TOWNSHIP 22-S RANGE 37-E NMPM.		10. Field and Pool, or Wildcat Drinkard	
15. Elevation (Show whether DF, RT, GR, etc.) 3312.6' GL		12. County Lea	

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUS AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUS AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Dual completion Drinkard and
OTHER <input type="checkbox"/>		Wantz Granite Wash	

17. 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.

1. Rigged up pulling unit, installed BOP and pulled tubing and packer.
2. Set retrievable bridge plug @ 6500'.
3. Perforated 6231' to 7014'.
4. Acidized with 5000 gallons 15% LSTNE.
5. Ran tubing and packer.
6. Tested well.

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

SIGNED *Marlene Jones* TITLE Production Clerk DATE 11-27-73

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: