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LAND OFFICE	
OPERATOR	

# 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 -" (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 Production		8. Farm or Lease Name Cossatot "I"	
3. Address of Operator 525 Midland Tower, Midland, Texas 79701		9. Well No. #1	
4. Location of Well UNIT LETTER <u>D</u> FEET FROM THE <u>47</u> LINE AND <u>380</u> FEET FROM THE <u>74</u> LINE, SECTION <u>13</u> TOWNSHIP <u>22</u> RANGE <u>37</u> N.M.P.M.		10. Field and Pool, or Wildcat Drinkard	
15. Elevation (Show whether DF, RT, GR, etc.)		12. County Lea	

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/> None

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input checked="" type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/> See below

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.

Extended 2 inch lines on 8 5/8 Surface Casing from cellar to top of ground level with testing valve as directed and witnessed by Commission.

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

SIGNED <u>Aubrey E. Kenyon</u>	TITLE <u>Production Foreman</u>	DATE <u>8-1-75</u>
APPROVED BY <u>Orig. Signed by</u>	TITLE <u>Checked</u>	DATE <u>8-1-75</u>
CONDITIONS OF APPROVAL, IF ANY:		