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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
John H. Hendrix Corporation

Address
223 W. Wall, Suite 525, Midland, Texas 79701

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:

Recompletion Oil Dry Gas

Change in Ownership Casinghead Gas Condensate

Effective 1/1/87

If change of ownership give name and address of previous owner Samedan Oil Corporation, 600 N. Marienfeld, Suite 320, Midland, Tx 79701

I. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Parks</u>	Well No. <u>2</u>	Pool Name, Including Formation <u>Paddock</u>	Kind of Lease State, Federal or Fee <u>Fee</u>	Lease No.
Location Unit Letter <u>M</u> ; <u>450</u> Feet From The <u>South</u> Line and <u>520</u> Feet From The <u>West</u>				
Line of Section <u>14</u> Township <u>22-S</u> Range <u>37-E</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

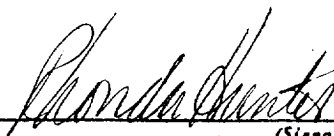
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Texaco Trading & Transportation Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 6196, Midland, Texas 79702</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Texaco Producing</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 1137, Eunice, New Mexico 88231</u>
If well produces oil or liquids, give location of tanks. Unit <u>7m</u> Sec. <u>14</u> Twp. <u>22</u> Rge. <u>37</u>	Is gas actually connected? <u>When</u>

If this production is commingled with that from any other lease or pool, give commingling order number: 10 H 2 29

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.


(Signature)
Production Assistant

(Title)
January 7, 1987

(Date)

OIL CONSERVATION DIVISION

APPROVED 10 1 1987, 19

BY JERRY SEXTON
DISTRICT SUPERVISOR

TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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