DISTRICT II P.O. Drawer DD, Antesia, NM 88210

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

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	TO	HAN	SPU	11 OIL	AND NAT	011/12 0/1	Well AP	l No.			
perator ,						-		-025-	2031	i -	
John H. Hendrix Corpo	ration						<i>JU</i> _	UNU			
Addr&@3 W. Wall, Suite 52	25										
Midland, TX 79701						/Places :!-:	n)				
Reason(s) for Filing (Check proper box)				_	U Other	(Please explai	",				
lew Well	Ch	ange in Ti		st ol:		_		_			
mplation	Oil		Эгу Gas		Ef:	fective	4/1/93	2			
Thange in Operator X	Casinghead G	ias 🔲 C	Condensa	ile 📗		<u>.</u>					
shapes of operator give name				nr D	ov 196	L, Midl	and m	v 797(12		
ad address of previous operator Ory	<u>yx Ener</u>	<u>yy Li</u>	omba	TTX 4 12	₩ <u>₩ ±00</u> .	-y rizul	and, 1				
I. DESCRIPTION OF WELL A	AND LEAS	E					V:-4 c4	Lease Sta	ite le	ase No.	
ease Name	W	'ell No. I	Pool Nar	ne, Including	g Formation		State. F	State, Federal or Fee			
State Land 15		6	Drin	kard							
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0	. 330) 1	Feet From	m The SO	uth_Line	and 1650	Fee	t From The _	East -	Line	
Unit Letter	. :								Lea	County	
Section 16 Township	21-S	Ţ	Range	37-E	, NN	IPM,			пеа	County	
II. DESIGNATION OF TRANS	SPORTER	OF OI	LAND) NATUF	RAL GAS		 		is to ke		
II. DESIGNATION OF TRAIN. Name of Authorized Transporter of Oil		r Condens	ate r			address to wh	uch approved	copy of this fo	m 15 10 DE SE		
Texas New Mexico P	l XI		į		P.O.	Box 151	0, Mid	land, '	rx 79		
Texas New Mexico P	Therrite		or Dry C	Jas 🗍	Address (Gin	address to wh	iich approved	copy of this fo	rm is to be se	nt) -	
Name of Authorized Transporter of Casing		لما	~·, `	ر ب	P.O.	Box 165	0, Tul	sa, OK	74102	<u>}</u>	
Texaco Exp. & Prod			Twp.	Roe	ls gas actuall	connected?	When	7			
If well produces oil or liquids,	Unit IS		21S	37E	Ye		İ				
rive location of tanks.				·	1						
this production is commingled with that f	from any other	terre or b	www, givi	, communiti	0.100						
V. COMPLETION DATA					New Well		Deepen	Plug Back	Same Res'v	Diff Res'v	
		Oil Well	i G	Sas Well	I MEM MARIE	''' \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1 230000	<u> </u>		i	
Designate Type of Completion	- (^)	Ĺ <u></u> _	_!_		Total Depth	l	<u></u>	P.B.T.D.	<u> </u>		
Date Spudded	Date Compl.	Ready to	Prod.		I coat 17thu						
•					Top Oil/Gas	Day		Tubing Dept	h		
Elevations (DF, RKB, RT, GR, etc.)	Name of Pro	ducing Fo	rmation		TOP OILOSE	• - 7	÷	Taomis Deb	-,		
					<u> </u>			Depth Casin	a Shoe		
Perforations								Lepui Casin	P 01100		
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V. TEST DATA AND REQUE	ST FOR A	LLOW	ABLE				lowable for th	is depth or be	for full 24 ho	ers.)	
V. TEST DATA AND REQUES OIL WELL (Test must be after t	ST FOR A recovery of tol	LLOW and volume	ABLE of load	oil and musi	t be equal to o	r exceed top al	lowable for th	is depth or be	for full 24 ho	ers.)	
OIL WELL (Test must be after t	ST FOR A recovery of tol Date of Tes	al volume	ABLE of load	oil and mus	t be equal to o	r exceed top al lethod (Flow, p	lowable for th nump, gas lift,	is depth or be	for full 24 ho	urs.)	
V. TEST DATA AND REQUES OIL WELL (Test must be after to Date First New Oil Run To Tank	recovery of lot	al volume	ABLE of load	oil and mus	Producing iv	lealog (1 10.7)	lowable for th nump, gas lift,	·		urs.)	
OIL WELL (Test must be after to Date First New Oil Run To Tank	Date of Tes	al volume	ABLE of load	oil and mus	Producing N	lealog (1 10.7)	iowabie for th ownp, gas lift,	is depth or be etc.) Choke Size		urs.)	
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OIL WELL (Test must be after to Date First New Oil Run To Tank Length of Test Actual Prod. During Test	Date of Test Tubing Pres Oil - Bbls.	al volume	<i>o</i> j 1000	oil and mus	Casing Pres Water - Bbi	sure s. cusaie/MMCF	iowable for th nump, gas lift,	Choke Size Gas- MCF Gravity of	Condensale	urs.)	
OIL WELL (Test must be after to Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D	Date of Test Tubing Pres Oil - Bbls.	al volume	<i>o</i> j 1000	oil and mus	Casing Pres Water - Bbi	sure	iowable for th nump, gas lift,	Choke Size	Condensale	urs.)	
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- INSTRUCTIONS: This form is to be filed in compliance with Rule 1104 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 4) Separate Form C-104 must be filed for each pool in multiply completed wells.