

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator JOHN H. HENDRIX CORPORATION		Well API No. 30-025- 24557 10232
223 WEST WALL, SUITE 525, MIDLAND, TEXAS 79701		
Check (s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
Oil Well <input type="checkbox"/>	Change in Transporter of:	
Transportation <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
Change of operator give name and address of previous operator ORYX ENERGY COMPANY, P. O. BOX 2880, DALLAS, TEXAS 75221-2880		

DESCRIPTION OF WELL AND LEASE		Well No.	Pool Name, including Formation	Kind of Lease State, Federal or Fee	Lease No.
ELLIOTT "B" 12		1	PADDOCK		NM 032369
Location					
Unit Letter D : 660 Feet From The NORTH Line and 660 Feet From The WEST Line					
Section 12 Township 22-S Range 37-E , NMPM, LEA County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
Designated Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>			Address (Give address to which approved copy of this form is to be sent)		
TEXAS NEW MEXICO PIPELINE COMPANY			PO BOX 42130, HOUSTON, TEXAS 77242		
Designated Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>			Address (Give address to which approved copy of this form is to be sent)		
TEARCO PRODUCING, INC.			PO BOX 3109, MIDLAND, TEXAS 79702		
Well produces oil or liquids, or both of tanks	Unit	Sec.	Twp.	Rge.	Is gas actually connected? When?
	P	20	21-S	37-E	YES
If well production is commingled with that from any other lease or pool, give commingling order number: DHC- 634 634					

IV. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Designate Type of Completion - (X)									
Well Spudded	Date Compl. Ready to Prod.	Total Depth				P.B.T.D.			
Well (DF, AKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay				Tubing Depth			
						Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE			
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)			
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Water Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL			
Water Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Well (flowed (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Phonda Hunter
Signature Phonda Hunter Prod. Asst.
Printed Name 4-10-92 Title 915-684-6631
Date Telephone No.

OIL CONSERVATION DIVISION

APR 14 '92

Date Approved _____

By JOHN H. HENDRIX PRODUCER

Title _____

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- All sections of this form must be filled out for allowable on new and recompleted wells.
- Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- Separate Form C-104 must be filed for each pool in multiply completed wells.