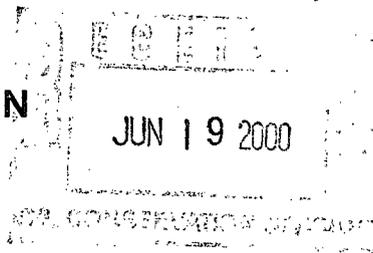
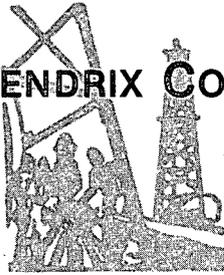


JOHN H. HENDRIX CORPORATION



NSL 7/10/00

MAILING ADDRESS
P.O. BOX 3040
MIDLAND, TX 79702-3040

(915) 684-6631
FAX (915) 684-7317
110 N. MARIENFELD, SUITE 400
MIDLAND, TEXAS 79701-4412

June 2, 2000

Mr. Michael Stogner
State of New Mexico
Oil Conservation Division
2040 S. Pacheco
Santa Fe, NM 87505

Attn: Mr. Michael Stogner

RE: Application for Unorthodox Gas
Well Location (Elliott B-12 No. 2)
and Simultaneous Dedication (Elliott
B-12 No. 2 and Elliott Hinton No. 1) in
the 160 Acre Communitized Blinebry
Gas Proration Unit, Comprised of the
NW/4 Section 12, T-22-S - R-37-E,
Lea County, New Mexico

Dear Mr. Stogner:

John H. Hendrix Corporation respectfully requests authorization to simultaneously dedicate Blinebry Gas Pool production to an existing 160 acre communitized Blinebry gas proration unit. This gas proration unit is comprised of the NW/4 of Section 12, T22S, R37E, Lea County, New Mexico. A Communitization Agreement dated March 10, 1956 pooled the NW/4 for the production of dry gas and associated liquid hydrocarbons from the Blinebry.

The Elliott Hinton No. 1, located 1650' FNL & 990' FWL, Section 12, T22S, R37E, Lea County, New Mexico, (Unit E) is the current Blinebry Gas Producer for this proration unit. Current producing rate for this well is approximately 800 MCFPD which is below the 2301 MCFPD allowable.

John H. Hendrix Corporation plans to workover and recomplete its Elliott B-12 No. 2, 567' FNL and 467' FWL (Unit D) Section 12, T22S, R37E, Lea County, New Mexico, in the Blinebry Gas Pool. As noted this well would be an unorthodox location. A San Andres-Paddock well is located at the standard 660' location.

N.M.O. C. D.

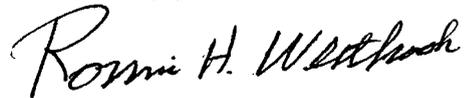
-2-

June 2, 2000

This work is necessary to meet offset competition. Offset operator to west has two wells on a 160 acre proration unit, one of which is unorthodox.

Thank you for your consideration of this matter. If you have any questions, please call.

Very truly yours,

A handwritten signature in black ink that reads "Ronnie H. Westbrook". The signature is written in a cursive style with a large initial "R".

Ronnie H. Westbrook
Vice President

RHW/ah

Enclosures

OFFSET OPERATORS
NW/4 Section 12,
T-22-S, R-37-E
Lea County, New Mexico

2 Exxon-Mobil	John H. Hendrix Corp.	1 Chevron	
11 Marathon	160 Acre Proration Unit	12 John H. Hendrix Corp.	
	Pure Resources (Titan)	John H. Hendrix Corp.	
14		13	

District I
PO Box 1980, Hobbs, NM 88241-1980

District II
811 South First, Artesia, NM 88210

District III
1000 Rio Brazos Rd., Aztec, NM 87410

District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-102
Revised October 18, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number 30-025-25137		2 Pool Code 72480		3 Pool Name Blinebry Gas	
4 Property Code 005170		5 Property Name Elliott B-12			6 Well Number 2
7 OGRID No. 012024		8 Operator Name John H. Hendrix Corporation			9 Elevation

10 Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West Line	County
D	12	22S	37E		567	North	467	West	Lea

11 Bottom Hole Location If Different From Surface

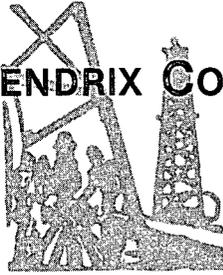
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West Line	County

12 Dedicated Acres 160.00	13 Joint or Infill	14 Consolidation Code	15 Order No.
------------------------------	--------------------	-----------------------	--------------

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

<p>16</p> <p>567 #2</p> <p>467</p> <p>1650</p> <p>Elliott Hinton</p> <p>990 #1</p>	<p>17 OPERATOR CERTIFICATION</p> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief</p> <p><i>Ronnie H. Westbrook</i></p> <p>Signature Ronnie H. Westbrook</p> <p>Printed Name Vice President</p> <p>Title 05-19-00</p> <p>Date</p>		
	<p>18 SURVEYOR CERTIFICATION</p> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p> <p>Date of Survey</p> <p>Signature and Seal of Professional Surveyer:</p> <p>Certificate Number</p>		

JOHN H. HENDRIX CORPORATION



MAILING ADDRESS
P.O. BOX 3040
MIDLAND, TX 79702-3040

(915) 684-6631
FAX (915) 684-7317
110 N. MARIENFELD, SUITE 400
MIDLAND, TEXAS 79701-4412

June 2, 2000

CERTIFIED MAIL

OFFSET OPERATORS

Elliott B-12 No. 2 Well
Elliott Hinton No. 1
160 Acre Proration Unit
NW/4 Section 12, T22S -
R37E, Lea County, NM

Dear Offset Operator:

John H. Hendrix Corporation is making application for an unorthodox gas well location (Elliott B-12 No. 2) and simultaneous dedication (Elliott B-12 No. 2 and Elliott Hinton No. 1) in the Blinbry Gas Pool for the referenced wells and proration unit. NMOCD Rule 104D requires that you be notified of this action.

A copy of the application is attached. If you have any questions, call me at (915) 684-6631.

Very truly yours,

A handwritten signature in black ink that reads "Ronnie H. Westbrook". The signature is written in a cursive, flowing style.

Ronnie H. Westbrook
Vice President

RHW/ah

Attachments

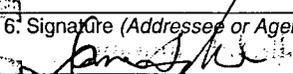
OFFSET OPERATORS
NW/4 SECTION 12
T-22-S - R-37-E
LEA COUNTY, NEW MEXICO

Exxon-Mobil
P. O. Box 4358
Houston, TX 77210-4358

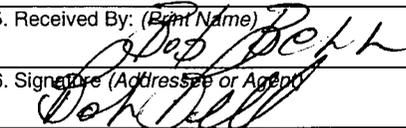
Chevron USA Production Company
P. O. Box 1150
Midland, TX 79702

Pure Resources (Titan)
500 W. Texas Avenue, Suite 500
Midland, TX 79701

Marathon Oil Company
P. O. Box 2490
Hobbs, NM 88240

Is your RETURN ADDRESS completed on the reverse side?	SENDER: <input type="checkbox"/> Complete items 1 and/or 2 for additional services. <input type="checkbox"/> Complete items 3, 4a, and 4b. <input type="checkbox"/> Print your name and address on the reverse of this form so that we can return this card to you. <input type="checkbox"/> Attach this form to the front of the mailpiece, or on the back if space does not permit. <input type="checkbox"/> Write "Return Receipt Requested" on the mailpiece below the article number. <input type="checkbox"/> The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery		
	3. Article Addressed to: Marathon Box 2490 Hobbs NM 88240		4a. Article Number 3 470-656-263		
		4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD			
		7. Date of Delivery 6-6-00			
5. Received By: (Print Name)		8. Addressee's Address (Only if requested and fee is paid)			
6. Signature (Addressee or Agent) 					
PS Form 3811, December 1994		102595-99-B-0223		Domestic Return Receipt	

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?	SENDER: <input type="checkbox"/> Complete items 1 and/or 2 for additional services. <input type="checkbox"/> Complete items 3, 4a, and 4b. <input type="checkbox"/> Print your name and address on the reverse of this form so that we can return this card to you. <input type="checkbox"/> Attach this form to the front of the mailpiece, or on the back if space does not permit. <input type="checkbox"/> Write "Return Receipt Requested" on the mailpiece below the article number. <input type="checkbox"/> The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery		
	3. Article Addressed to: Chevron Box 1150 Midland TX 79702		4a. Article Number 3 470 656 265		
		4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD			
		7. Date of Delivery JUN 05 2000			
5. Received By: (Print Name)		8. Addressee's Address (Only if requested and fee is paid)			
6. Signature (Addressee or Agent) 					
PS Form 3811, December 1994		102595-99-B-0223		Domestic Return Receipt	

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

3. Article Addressed to:

*Edison Mobile
Box 4358
Houston TX 77210-4358*

4a. Article Number
3 470 656 266

4b. Service Type

Registered Certified

Express Mail Insured

Return Receipt for Merchandise COD

7. Date of Delivery
JUN 6 - 2000

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Addressee or Agent)
GEE

PS Form 3811, December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

3. Article Addressed to:

*Pure Resources
500 W. Texas
Suite 500
Madison 479701*

4a. Article Number
3 470 656 264

4b. Service Type

Registered Certified

Express Mail Insured

Return Receipt for Merchandise COD

7. Date of Delivery
6-5-00

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Addressee or Agent)
Marta Clausen

PS Form 3811, December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.