DISTRICTII F.O. Drawer DD, Anesia, NM 88210

Revised x-x-07 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICTIII 1000 Rio Brazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

O KIO DIAIXA Kod Massay	HEQUEST PO TO TRA	NSPORT OIL	AND NATURAL GA	Well AFI	No		
erator ,	10 111/1		200	Well Al'I	140.		
John H. Hendrix Corp	oration -						
hard W. Wall, Suite 5	25						
Midland, TX 79701			Other (l'lease expl	ain)			
son(x) for Filing (Check proper box)			and +	15)-15-9	0	
v Well		Transporter of:	Ellion	we 10)-15-1	0	
ompletion		1719 040	0000		<u> </u>		
nge in Operator	Casinghead Gas	Condensale					
anne of operator give name							 ,
address of previous operator	<u></u>						
DESCRIPTION OF WELL A	AND LEASE		rtlan	Kind of	LeseFEE	Lea	se No.
ise Name	Well No.	Pool Name, Includi		State, Fe	deral or Tee		
homas Long	2	Drinkar	<u>rd</u>				
ation				20	From The We	st	Line
Unit LetterM	. 330	_ Feet From The \underline{S}	outh Line and3	1.660	From the		
Unit Letter				Lea_			County
Section 11 Township	22-5	Range 37-E	, NMIM, .	шеа			
			m 4 7 7 1 8 C				
DESIGNATION OF TRAN	SPORTER OF C	IL AND NATU	Address (Give address to	which arm oved o	opy of this form i	s to be sen	1)
ne of Authorized Transporter of Oil	[X] or Conde	nsale					
Shell Pipeline Co			Box 2648, Ho Address (Give address to	US COIL	one of this form	is to be ser	u)
me of Authorized Transporter of Casing	ghead Gas	or Dry Gal. X	Address (Give address to	мися аррочеа с	7007	0	
El Paso Natural G	as Co.		Box 1492, El	Paso	7		
well produces oil or liquids,	Unit Sec.		Is gas actually connected?	l when	10-1	5-9	U
densition of tanks	N 111	<u> 22 37 </u>	1 <u>yes</u>	i		<u> </u>	
in production is commingled with that	from any other lease o	r pool, give comming	gling order/number:				
COMPLETION DATA	•			7 5 7	Plug Back San	ne Res'y	Diff Ret'y
	Oil We	II Gas Well	New Well Workover	Deepen	I log Dack Jour	.,	i
Designate Type of Completion	- (X)				r.B.T.D.		<u> </u>
te Spidded	Date Compl. Ready	to Frod.	Total Depth		1.6.1.5.		• .
ie Spacoco					Tubing Depth		
evations (DF, RKB, RT, GR, etc.)	Name of Producing	Formation	Top Oil/Gas Pay		Tubing Depar		
evadons (15) , MAD, 10) 500 500					Depth Casing Shoe		
tiorations	.]			-)		
Holadona					<u> </u>		
	TUBING	J. CASING ANI	CEMENTING RECO	ORD		KS CEM	ENIT
		TUBING SIZE	DEPTH S	<u> </u>	SAC	KS CEM	E111
HOLE SIZE	- 0/10/10 0				.		
	_				<u> </u>		
	_				<u> </u>		
	EFFOR ALLOS	VÄBLE					. •
. TEST DATA AND REQUE	AL FOR KIDDO	ne of load oil and mi	us be equal to or exceed top	allowable for this	s depth or be for	full 24 hou	rs.)
IL WELL (Test mint be after	Date of Test	Le of love on the	Producing Method (Flow	, pwnp, gas lift.	etc.)		
ate First New Oil Run To Tank	Date of Tea						
			Casing Pressure		Choke Size		
ength of Test	Tubing Pressure						
			Water - Bbls.		Gas- MCF		
ctual Prod. During Test	Oil - Bbls.						
JAS WELL					Gravity of Cor	densate	
Actual Prod. Test - MC17D	Length of Test		Bbls. Condensate/MMCF		Gravity of Condenses		
remail from test - meric					Choke Size		
	1		Casing Pressure (Shut in	1)	Choke bize		
it it at a factor back pr	Tubing Pressure (shut-in)					
esting Method (pitot, back pr.)	Tubing Pressure (shut-in)					
					- MTION D	IVICI	NC
A OPERATOR CERTIFI	CATE OF COM	MPLIANCE	OIL C	ONSERV	'ATION D	IVISI	NC
I. OPERATOR CERTIFI	CATE OF CON	MPLIANCE	OIL Co	ONSERV	'ATION D	IVISI	ИС
/I. OPERATOR CERTIFI Thereby certify that the rules and reg	CATE OF COI	MPLIANCE nservation given above					
VI. OPERATOR CERTIFI	CATE OF COI	MPLIANCE nservation given above	OIL Co				
VI. OPERATOR CERTIFI Thereby certify that the rules and reg Division have been complied with as Is true and complete to the best of m	CATE OF CON collations of the Oil Connection	MPLIANCE nservation given above	Date Appro	ved			
VI. OPERATOR CERTIFI 1 hereby certify that the rules and rep Division have been complied with as Is true and complete to the best of m	CATE OF CON collations of the Oil Connection	MPLIANCE nservation given above	Date Appro	ved			
VI. OPERATOR CERTIFI Thereby certify that the rules and reg Division have been complied with as is true and complete to the best of m	CATE OF CON CONTROL CO	MPLIANCE Inservation given above f.	Date Appro	ved			
VI. OPERATOR CERTIFI Thereby certify that the rules and reg Division have been complied with as is true and complete to the best of m	CATE OF CON CONTROL CO	MPLIANCE Inservation given above I.	Date Appro	oved	<i>J</i>		
VI. OPERATOR CERTIFI Thereby certify that the rules and reg Division have been complied with as is true and complete to the best of m Signature Richard Name	CATE OF COI guilations of the Oil Co and that the Information by Knowledge and belie	MPLIANCE Inscription given above I. Asst.	Date Appro	oved	<i>J</i>		
Division have been complied with a is true and complete to the best of many signature — Elionda Hunter	CATE OF COI guilations of the Oil Co and that the Information by Knowledge and belie	MPLIANCE Inservation given above f. Asst. Title	Date Appro	oved	<i>J</i>		

- 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
- with Rule 111. 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.