

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

MEMORIALIZATION TO RECORD OF THE OIL AND NATURAL GAS

Oil	
Gas	
Other	

John H. Hendrix Corporation

525 Midland Tower, Midland, Texas 79701

(Check proper box)

Oil Well
 Change of Operator
 Change in Ownership

Change of Operator
 4/1/77

If change of ownership give name and address of previous owner

Bruce A. Wilbanks, P. O. Box 763, Midland, Texas 79701

Operator

III. DESCRIPTION OF WELL AND LEASE

Lease Name Wood State A	Well No. 2	Pool Name, including Formation Eumont (Queen)	Kind of Lease State, Federal or Fee State	Lease No. B-2406
Location Unit: Letter F, 1980 Feet From The North Line and 1650 Feet From The West				
Line of Section: 16 Township 20-S Range 37-E, NMPM, Lea County				

IV. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate None	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas or Dry Gas El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, Texas 79978
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rce. Is gas actually connected? When

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	Despen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Total Casing Depth	Tubing Depth			
Perforations				Depth Casing Shoe		
TUBING, CASING, AND CEMENT						
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			

VI. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL			
Date First New Oil Run To Tanks	Date of Test	Type of Test (spot, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil - Bbls.	Gas - MCF	

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Actual Prod. Test - MCF	Gravity of Gas (specify)
Testing Method (pitot, back pr.)	Tubing Pressure (6000-12)	Casing Pressure (6000-12)	Casing Size

VII. CERTIFICATE OF COMPLIANCE

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

Laura K. Wright
(Signature)

Production Clerk
(Title)

April 6, 1977
(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 11 1977
 Orig. Signed by
 Jerry Sexton
 Dist 1, Supv.

This form is to be filed in compliance with RULE 1104.
 If this is a request for allowable for a newly drilled or despened 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 changes of condition.

RECEIVED

JUNE 1977

U.S. CONSTITUTIONAL COMM.
WASHINGTON, D. C.