	DIST IN IT ION		<del>~</del> .		
	SANTAFE	- 1	NEW MEXICO OIL CONS		
I.	FILE		REQUEST FOR		
	U.S.G.S.				
	Larp or rice		AUTHORIZATION TO TRADS		
	TRANSFORTER CHL GAS				
	OPERATOR	i i			
	PRORATION OFFICE Operator				
	John H. Hendrix Corporation				
	Researce) France (Circle proper low)				
	New Well	•	Change in Transport		
	Recompletion []		011	liv Gas [	
	Change in Countribut X		Castrighead Gas	Sendent are	
	If change of prostriling give n and arguest of providur evens	: <u> </u>	o <u>hn H. Hendrix</u>	k, 525 Midlan	
EF.	LESS INTRONOUNCELL INDILEASE				
	Lease Name			, Including Formatic	
	H. S. Record		1 E	umont-Yates	
	Location				
	1 1 m (1 1 m (1 m )	1650	N.	ما همدها	

SANTAFE FILE U.S.G.S. LAUDIG FICE	REQUE	IL CONSERVATION COMME IN EST FOR ALLOWABLE AND AND NATURA	Form C-104 Superarcles Old -107 cold e Effective 1-1-65	
DPERATOR  I. PHORATION OFFICE  Operator				
John H. Hendrix Co	orporation			
525 Midland Tower  Reason(s) Leading (Cleak prop  New Well  Recompletion  Change in Conferency X	Ohange in Transporter of: Oil	Other (Please explain)	• • • • • • • • • • • • • • • • • • • •	
16 cheminal	Castinghead Gas Co	Effective 1,		
### EPSC ONTON OUT THE These Name	John H. Hendrix, 525 NO LEASE		Texas 79701	
H. S. Record	well No. Pool Name, including  1 Eumont-	Yates & Seven Riverse, Fode	# TO #	
Unit Letter H	1650 Feet From The North	330		
Line of Section 15	Township 20-S Fange	0.0 5		
	ORTER OF OIL AND NATURAL O	, , , , , , , , , , , , , , , , , , , ,	d County	
Name of Authorized Transporter of Arco Pipeline Con	Oll X or Condensate	Address (Give address to which appr	roved copy of this form is to be sent;	
Name of Authorized Transporter o	Casinghead Gas X or Dry Gas	P. U. Drawer XX, Der	nver City, Texas 79323	
Warren Petroleum If well produces oil or liquids,	Corporation Unit   Sec.   Twp.   Ege.	P. O. Box 1589, Tuls	sa, Oklahoma 74101	
give location of tanks.  If this production is commingled	with that from any other lease or pool	i		
JUNE BEHON BATA				
Designate Type of Compl	Pate Compl. Ready to Prod.		Plug Back   Same Resty, Offi, Resty,	
		Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.	., Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Perforations	TUBING, CASING, AN		Depth Casing Shoe	
HOLE SIZE				
		DEPTH SET	SACKS CEMENT	
7. TEST DATA AND REQUEST		after resovery of total volume of load oil	and must be equal to or exce it top allow.	
OH. WELL  Date First New Oil Run To Tanks	Date of Test	epth or be for full 24 hours)  Producing Method (Flow, pump, gas li)		
Length of Test	Tubing Pressure	Casing Fressure	Cheke Size	
Actual Prod. During Test	Cil-Bbls.	Woter - Bris.		
		3.3.	Ges-MOF	
GAS WELL Actual Fred, Test-MCF/D				
	Length of Test	Bbls. Condensate/MMCF	Gravity of Concensate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Chcke Size	
L CERTIFICATE OF COMPLIA	NCE	OIL CONSERVA	TION COMMISSION	
I hereby certify that the rules and	regulations of the Oil Conservation with and that the information given	APPROVED		
above is true and complete to the	ne best of my knowledge and belief.	Orig. Signed by  Jerry Sexton		
,		TITLE Diet 1. Supv.		
11.000 K	Weight	This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or desprised		
<pre>Production Clerk</pre>		well, this form must be accompanied by a tabulation of the divinition 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.		
ίτ January 18, 1977	iile)			
	ale)	Fill out only Sections I. II. well name or number, or transporter	III, and VI for changes of owner,	

