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U.S.G.S.		
LAND OFFICE		
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OPERATOR		
PRODUCTION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Oil 1-1-65
Effective 1-1-65

I. OPERATOR
Operator
John H. Hendrix Corporation
Address
525 Midland Tower, Midland, Texas 79701
Reason(s) for filing (check proper box)
Dry Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Conditions ☒ Oil ☐ Dry Gas ☐ Condensate ☐
Effective 1/1/77
Name of person who gave name and address of production owner John H. Hendrix, 525 Midland Tower, Midland, Texas 79701

II. DESIGNATION OF POOL AND LEASE
Lease Name State JJ Well No. 2 Pool Name, including Formation Langlie Mattix Kind of Lease State, Federal or Fee State Lease No. B-1167
Location
Unit Letter J 1980 Feet From The South Line and 1980 Feet From The East
Line of Section 13 Township 23-S Range 36-E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
The Permian Corporation Permian LEA Address (Give address to which approved copy of this form is to be sent)
P. O. Box 1183, Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Phillips Petroleum Company GPM Gas Corporation EFFECTIVE February 1, 1982 Phillips Butte, Bartlesville, OK 74003
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When

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

IV. COMPLETION DATA
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Footing Oil Well
Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.
Elevations (DF, RAB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth
Perforations 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 Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)
Length of Test Tubing Pressure Casing Pressure Choke Size
Actual Prod. During Test Oil-Bbls. Water-Bbls. Gas-MCF

GAS WELL
Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate
Testing Method (pilot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size

VI. 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.
Signature
Production Clerk
January 18, 1977
(Signature)
(Title)
(Date)

OIL CONSERVATION COMMISSION
APPROVED _____, 19____
BY _____
TITLE _____
This form is to be filed in compliance with RULE 110.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the production 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 such change of condition.

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JAN 24 1977

U.S. DEPT. OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D. C. 20535