Affinition       Anticipation       at Bottom of Page         OF Date 1990, Hobse, NM 85240       OIL CONSERVATION DIVISION       at Bottom of Page         DSTRICT II       P.O. Box 2008       Santa Fe, New Mexico 87504-2088         DISTRICT II       TO TRANSPORT OIL AND NATURAL GAS         Offentor       Weil API No.         IoD No Braze Ra, Azee, NM 8740       REQUEST FOR ALLOWABLE AND AUTHORIZATION         1       TO TRANSPORT OIL AND NATURAL GAS         Offentor       Oil Check proper box         Inhom, H., Hendrix, Corporation       30-025-09943         Address       79701         Rescondy for Filing (Check proper box)       Change in Transporter offentor (Fease amplein)         New Well       Oti Dry Ga       Effective 12-1-89         Range in Operator       X       Casingheed Gas       Condenate         In DESCRIPTION OF WELL AND LEASE       Execution for the second for Fease amplein       State of Lease       State of Lease         Law No.       Section       To remaking Pornic Casingheed Gas       Condenate       Lawe No.         Law No.       Section       To remaking Pornic Null Ne. Pool Name, Including Pornation       State of Lease       Lawe No.         Law No.       Section       To remaking Pornic Null Ne. Nothot Null Ne.       State of Lease       Lawe No.	580, Hobbs, NM 88240 II r DD, Artesia, NM 88210 III		
FG. Drawer DD, Astesia, NM 85210       Santa Fe, New Mexico 87504-2083         DSTRICT_III       REQUEST FOR ALLOWABLE AND AUTHORIZATION         I.       TO TRANSPORT OIL AND NATURAL GAS         Operator       30-025-09943         Address       30-025-09943         Address       30-025-09943         Address       30-025-09943         Address       30-025-09943         Address       Competion         223 West Wall, Suite 525, Midland, Texas 79701       Reacotiol for Filing (Chest areptain)         Recompteino       Oil       Dry Gas         Executio for Filing (Chest areptain)       Change in Transporter of         Recompteino       Oil       Dry Gas       Effective 12-1-89         Change in Operator       Crassighead Gas       Condenset       Effective 12-1-89         Change in Operator       Cry K Energy Company, P. O. Box 1861, Midland, Texas 79702       Ease No.         Lynch Walter       2       South Brunson Drinkard Abo       State, Federal or Fee       Fee         Location       Usit Letter       1980       Feet From The South Line and 660       Feet From The West         Section       Township       72-S       Range 37-E       NMPM. Lea       Com         Name of Auborized Transporter of Oil       To	r DD, Artesia, NM 88210		
REQUEST FOR ALLOWABLE AND AUTHONICATION         In the second	III razos Rd., Aztec, NM 87410		
1       Will NINC       30-025-09943         Address       30-025-09943         223 West Wall, Suite 525, Midland, Texas 79701       30-025-09943         Resconds for Filing (Check proper box)       Change in Transporter of:         Recompletion       ON       Dry Gas         Change in Operator       Campehend Gas       Condensate         If change of operator give same and address of previous operator       Oryx Energy Company, P. O. Box 1861, Midland, Texas 79702         It DESCRIPTION OF WELL AND LEASE       Kind of Lease       Kind of Lease         Later Name       Well No. Pool Name, Including Formation       Kind of Lease         Lynch Walter       2       South Brunson Drinkard Abo       State, Federal or Fee         Location       Unit Letter       1980       Feet From The South Line and 660       Feet From The West         Location       Section       Township 22-S       Raage 37-E       NMFM, Lea       Com         Name of Authorized Transporter of Oil       Or Condensate       P. O. Box 1510, Midland, Texas 79702         Name of Authorized Transporter of Oil       Or Condensate       P. O. Box 3109, Midland, Texas 79702         Name of Authorized Transporter of Oil       Or Condensate       P. O. Box 3109, Midland, Texas 79702         Name of Authorized Transporter of Oil       Dr       O			
John H. Hendrix Corporation       30-023-03743         Address       223 West Wall, Suite 525, Midland, Texas 79701         223 West Wall, Suite 525, Midland, Texas 79701       Other (Flease explain)         Reason(a) for Filing (Check proper box)       Change in Transporter of: Recompletion       Other (Flease explain)         New Well       Other (Stease explain)       Change in Transporter of: Recompletion       Change in Transporter of: Catinghead Gas       Condensate         If change of operator give same address of previous operator address of previous operator       Ory X Energy Company, P. O. Box 1861, Midland, Texas 79702         ID DESCRIPTION OF WELL AND LEASE Lease Name       Well No. Pool Name, Including Formation       Kind of Lease State, Federal or Fee       Lease No.         Unit Letter       1980       Feet From The South Line and 660       Feet From The _West       Count         Unit Letter       1980       Feet From The South Line and 660       Feet From The _West       Count         II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       Address (Give address to which approved copy of this form is to be sent)       P. O. Box 1510, Midland, Texas _79702         Name of Authorized Transporter of Catinghead Gas       X       or Dry Gas       Address (Give address to which approved copy of this form is to be sent)         Name of Authorized Transporter of Catinghead Gas       X       or Dry Gas       Address (Give address			
Address       223 West Wall, Suite 525, Midland, Texas 79701         Rescon(s) for Filing (Check proper box)       Change in Transporter of:         New Well       Change in Transporter of:         Recompletion       Other (Please explain)         New Well       Change in Transporter of:         Recompletion       Other (Please explain)         Recompletion       Other (Please explain)         Recompletion       Orage in Transporter of:         Recompletion       Orage in Transporter of:         Recompletion       Oryx Energy Company, P. O. Box 1861, Midland, Texas 79702         II. DESCRIPTION OF WELL AND LEASE       Lease None         Lynch       Walter       2         Unit Letter       L       1980         Feet From The       South Brunson Drinkard Abo       Suse, Federal or Fee         Section       Township       22-S       Range         Name of Authorized Transporter of Oli       ON       Address (Give address to which approved copy of this form is to be sent)         Texas New Mexico Pipeline Co.       P. O. Box 3109, Midland, Texas 79702         II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authorized Transporter of Classiphead Gas       IX       or Dry Gas         Name of Authorized Transporter of Classiphead Gas       IX       <	H. Hendrix Corpor.		
Reason(s) for Filing (Check proper box)       Change in Transporter of:       Change in Transporter of:         New Well       Oil       Dry Gas       Effective 12-1-89         Change in Operator       Qryx Energy Company, P. O. Box 1861, Midland, Texas 79702         and address of perivous operator       Oryx Energy Company, P. O. Box 1861, Midland, Texas 79702         II. DESCRIPTION OF WELL AND LEASE       Kind of Lease         Loadion       Qryx Energy Company, P. O. Box 1861, Midland, Texas 79702         II. DESCRIPTION OF WELL AND LEASE       South Brunson Drinkard Aboo         Loadion       Qryx Energy Company, P. O. Box 1861, Midland, Texas 79702         Usit Letter       1980         Section       Township 22-S         Range 37-E       NMPM, Lea         Section       Township 22-S         Name of Authorized Transporter of Oil       or Condensate         P. O. Box 1510, Midland, Texas 79702         Name of Authorized Transporter of Casinghead Gas       or Orby Gas         Name of Authorized Transporter of Casinghead Gas       or Orby Gas         Name of Authorized Transporter of Casinghead Gas       or Orby Gas         Name of Authorized Transporter of Casinghead Gas       or Orby Gas         Name of Authorized Transporter of Casinghead Gas       or Orby Gas         Name of Authorized Transporter of Cas			
Image in Operator       Oil       Dry Gas       Effective 12-1-89         Change in Operator       Oryx Energy Company, P. O. Box 1861, Midland, Texas 79702         If change of operator give name and address of periodu operator       Oryx Energy Company, P. O. Box 1861, Midland, Texas 79702         II. DESCRIPTION OF WELL AND LEASE       Lease Name       Kind of Lease         Location       2       South Brunson Drinkard Abo       State, Federal or Fee         Location       2       South Brunson Drinkard Abo       State, Federal or Fee         Location       10 it Letter       1980       Feet From The South Line and 660       Feet From The West         Location       Section       1       Township       22-S       Range 37-E       NMPM, Lea       Common South Address to which approved copy of this form is to be sent)         Name of Authorized Transporter of Oil       IX       or Condenaste       P. O. Box 1510, Midland, Texas 79702         Name of Authorized Transporter of Catinghead Gas       IX       or Dry Gas       Address (Give address to which approved copy of this form is to be sent)         Name of Authorized Transporter of Catinghead Gas       IX       or Dry Gas       Madress (Give address to which approved copy of this form is to be sent)         Preace Producing, Inc.       Inc.       Inc.       P. O. Box 1510, Midland, Texas 79702         If	for Filing (Check proper box)		
Accompany Depression       Casinghead Gas       Condensate         Change in Operator       IX       Casinghead Gas       Condensate         If change of operator give same and address of previous operator       Oryx Energy Company, P. O. Box 1861, Midland, Texas       79702         II. DESCRIPTION OF WELL AND LEASE Lease Name       Well No.       Pool Name, Including Formation       Kind of Lease       Lease No.         Lynch Walter       2       South Brunson Drinkard Abo       Sate, Federal or Fee       Fee         Location       Unit Letter			
IL DESCRIPTION OF WELL AND LEASE         ILease Name         Lesse Name       Well No.       Pool Name, Including Formation       State, Federal or Fee       Fee         Lesse Name       2       South Brunson Drinkard Abo       State, Federal or Fee       Fee         Location       1       1980       Feet From The       South       Line and       660       Feet From The       West         Section       1       Township       22-S       Range       37-E       , NMPM,       Leas       Com         MIL DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authorized Transporter of Oil       X       or Condensate       P.       O. Box 1510, Midland, Texas       79702         Name of Authorized Transporter of Casinghead Gas       X       or Dry Gas       Address (Give address to which approved copy of this form is to be sent)         Name of Authorized Transporter of Casinghead Gas       X       or Dry Gas       Address (Give address to which approved copy of this form is to be sent)         P. O. Box 3109, Midland, Texas       79702       If well produces oil or liquids, Unit       Sec.       Twp.       Rgs.       Is gas actually connected?       When ?         If well produces oil or liquids, Unit       Inc.       Inc.       Is gas actually connected?	Operator X		
II. DESCRIPTION OF WELL AND LEASE       Well No.       Pool Name, Including Formation       Kind of Lease       Lease No.         Lynch Walter       2       South Brunson Drinkard Abo       Sate, Federal or Fee       Fee         Location       1       1980       Feet From The South Line and 660       Feet From The West       Fee         Section       1       Township       22-S       Range       37-E       NMPM, Lea       Com         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       Address (Give address to which approved copy of this form is to be seni)       P. 0. Box 1510, Midland, Texas 79702         Name of Authorized Transporter of Oil       Image: Common of Condensate       P. 0. Box 1510, Midland, Texas 79702         Name of Authorized Transporter of Casinghead Gas       Image: Common of Condensate       P. 0. Box 3109, Midland, Texas 79702         Name of Authorized Transporter of Casinghead Gas       Image: Common of Condensate       P. 0. Box 3109, Midland, Texas 79702         If well produces oil or liquids, producting is commingling order number:       Umage: Common of Condensate       Umage: Common of Condensate         V. COMPLETION DATA       Image: Completion - (X)       Image: Completion or Condensation       New Well       Workover       Deepen       Plug Back Same Resv       Diff R         Date Spudded       Date Compl. Ready to Prod.       Total Dept	f operator give name s of previous operator Or		
Lesse Name       Well No.       Pool Name, including rotination       State, Federal or Fee       Fee         Lynch Walter       2       South Brunson Drinkard Abo       State, Federal or Fee       Fee         Location       2       South Brunson Drinkard Abo       State, Federal or Fee       Fee         Location       1       1980       Feet From The South Line and 660       Feet From The West         Section       1       Township       22–S       Range       37–E       , NMPM, Lea       Court         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       Address (Give address to which approved copy of this form is to be sent)       P. O. Box 1510, Midland, Texas 79702         Name of Authorized Transporter of Oil  (X)       or Or Or Or Or y Gas       P. O. Box 3109, Midland, Texas 79702         Name of Authorized Transporter of Casinghead Gas       (X) or Dry Gas       P. O. Box 3109, Midland, Texas 79702         Name of Authorized Transporter of Casinghead Gas       (X) or Dry Gas       Is gas actually connected?       When 7         give location of tanks.       Unit       Sec.       Twp.       Rge.       Is gas actually connected?       When 7         give location of tanks.       Unit       Sec.       Twp.       Rge.       Is gas actually connected?       When 7         give location of tanks.			
Location       Unit Letter       L       1980       Feet From The       South       Line and       660       Feet From The       West         Section       1       Township       22-S       Range       37-E       , NMPM,       Lea       Count         Mame of Authorized Transporter of Oil       Image       or Condensate       Address (Give address to which approved copy of this form is to be sent)         Texas       Name of Authorized Transporter of Casinghead Gas       or Dry Gas       Address (Oive address to which approved copy of this form is to be sent)         Name of Authorized Transporter of Casinghead Gas       or Dry Gas       Address (Dive address to which approved copy of this form is to be sent)         Name of Authorized Transporter of Casinghead Gas       or Dry Gas       Address (Dive address to which approved copy of this form is to be sent)         Name of Authorized Transporter of Casinghead Gas       or Dry Gas       Address (Dive address to which approved copy of this form is to be sent)         Pseaco       Producing, Inc.       Pseaco       Pseaco       When 7         give location of tanks.       Image       If aga actually connected?       When 7         If well production is commingled with that from any other lease or pool, give commingling order number:       DHC-272       DHC-272         IV.       COMPLETION DATA       Designate Type of Complet	me		
Unit Letter       L       1980       Feet From The       South       Line and       000       Feet From The       Messe         Section       1       Township       22-S       Range       37-E       , NMPM,       Lea       Count         HI. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       Name of Authorized Transporter of Oil       Image: Count       Address       Give address to which approved copy of this form is to be sent)         Name of Authorized Transporter of Oil       Image: Count       P. O. Box 1510, Midland, Texas       79702         Name of Authorized Transporter of Casinghead Gas       Image: Count       P. O. Box 3109, Midland, Texas       79702         Name of Authorized Transporter of Casinghead Gas       Image: Count       P. O. Box 3109, Midland, Texas       79702         Name of Authorized Transporter of Casinghead Gas       Image: Count       P. O. Box 3109, Midland, Texas       79702         Name of Authorized Transporter of Casinghead Gas       Image: Count       P. O. Box 3109, Midland, Texas       79702         If well produces oil or liquids, producing, Inc.       Image: Count       Image: Count       P. O. Box 3109, Midland, Texas       79702         If well produces is communified with that from any other lease or pool, give communified order number:       DHC-272       DHC-272         IV. COMPLETION DATA       Image: C	<u>ch Walter</u>		
Section       1       Township       22-S       Range       37-E       , NMPM,       Lea       Count         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authonized Transporter of Oil       X       or Condensate       Address (Give address to which approved copy of this form is to be sent)         Texas New Mexico Pipeline Co.       P. 0. Box 1510, Midland, Texas 79702         Name of Authonized Transporter of Casinghead Gas       X       or Dry Gas       Address (Give address to which approved copy of this form is to be sent)         Name of Authonized Transporter of Casinghead Gas       X       or Dry Gas       Address (Give address to which approved copy of this form is to be sent)         Name of Authonized Transporter of Casinghead Gas       X       or Dry Gas       P. 0. Box 3109, Midland, Texas 79702         Name of Authonized Transporter of Casinghead Gas       X       or Dry Gas       P. 0. Box 3109, Midland, Texas 79702         If well produce oil or liquids, give commingling order aufmber:       P. 0. Box 3109, Midland, Texas 79702       Vertexas 79702         If well production is commingled with that from any other lease or pool, give commingling order aufmber:       DHC-272       Vertexas 79702         IV. COMPLETION DATA       Oil Well       Gas Well       New Well       Workover       Deepen       Plug Back [Same Res'v Diff R         Date Spudded       <	Unit Letter		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authorized Transporter of Oil  or Condensate  P. O. Box 1510, Midland, Texas 79702         Name of Authorized Transporter of Oil  or Condensate  P. O. Box 1510, Midland, Texas 79702         Name of Authorized Transporter of Casinghead Gas  or Dry Gas  Address (Give address to which approved copy of this form is to be sent)         P. O. Box 1510, Midland, Texas 79702         Name of Authorized Transporter of Casinghead Gas  Or Dry Gas  Address (Give address to which approved copy of this form is to be sent)         Texac Producing, Inc.         If well produces oil or liquids,  Unit Sec. Twp. Rge. Is gas actually connected? When ?         give location of tanks.         If this production is commingled with that from any other lease or pool, give commingling order sumber: DHC-272         IV. COMPLETION DATA         Designate Type of Completion - (X)         Date Compl. Ready to Prod.         Total Depth       P.B.T.D.         Elevations (DF, RKB, RT, GR, etc.)       Name of Producing Formation       Top Oil/Gas Pay         Perforations       Depth Casing Shoe         TUBING, CASING AND CEMENTING RECORD       Depth Casing Shoe	. – .		
Name of Authorized Transporter of Oil X       or Condensate       Indicating the interval of			
Texas       New Mexico Pipeline Co.       P. O. Box 1510, Midland, Texas       Texas       Texas         Name of Authorized Transporter of Casinghead Gas       X       or Dry Gas       Address (Give address to which approved copy of this form is to be sent)         Texaco       Producing, Inc.       P. O. Box 3109, Midland, Texas       79702         If well produces oil or liquids,       Unit       Sec.       Twp.       Rge.       Is gas actually connected?       When ?         If well production is commingled with that from any other lease or pool, give commingling order number:       DHC-272       DHC-272         IV. COMPLETION DATA       Oil Well       Gas Well       New Well       Workover       Deepen       Plug Back       Same Res'v       Diff R         Designate       Type of Completion - (X)       Image: Cass Well       New Well       Workover       Deepen       Plug Back       Same Res'v       Diff R         Date       Spudded       Date Compl. Ready to Prod.       Total Depth       P.B.T.D.       Image: Cass Shoe       Perforations       Perforations       Depth Casing Shoe         Ferforations       TUBING, CASING AND CEMENTING RECORD       DEPTH SET       SACKS CEMENT	SIGNATION OF TRAN		
Name of Authorized Transporter of Casinghead Gas       X       or Dry Gas       P. O. Box 3109. Midland, Texas 79702         If well produces oil or liquids, give location of tanks.       Unit       Sec.       Twp.       Rge.       Is gas actually connected?       When ?         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:       DHC-272       DHC-272         IV. COMPLETION DATA       Oil Well       Gas Well       New Well       Workover       Deepen       Plug Back       Same Res'v       Diff R         Designate Type of Completion - (X)       Oil Well       Gas Well       New Well       Workover       Deepen       Plug Back       Same Res'v       Diff R         Date Spudded       Date Compl. Ready to Prod.       Total Depth       P.B.T.D.       P.B.T.D.         Elevations (DF, RKB, RT, GR, etc.)       Name of Producing Formation       Top Oil/Gas Pay       Tubing Depth         Perforations       TUBING, CASING AND CEMENTING RECORD       Depth Casing Shoe       TUBING CONTER       DEPTH SET       SACKS CEMENT	s New Mexico Pipel		
Texaco Producting, The:       Unit       Sec.       Twp.       Rge.       Is gas actually connected?       When ?         If well produces oil or liquids, give location of tanks.	Authorized Transporter of Casing		
give location of tanks.       Image: Commingled with that from any other lease or pool, give commingling order aumber: DHC-272         If this production is commingled with that from any other lease or pool, give commingling order aumber: DHC-272         IV. COMPLETION DATA         Designate Type of Completion - (X)         Date Spudded       Date Compl. Ready to Prod.         Total Depth       P.B.T.D.         Elevations (DF, RKB, RT, GR, etc.)       Name of Producing Formation         TUBING, CASING AND CEMENTING RECORD         TUBING CASING AND CEMENTING RECORD         Depth SET	oduces oil or liquids,		
IV. COMPLETION DATA       Oil Well       Gas Well       New Well       Workover       Deepen       Plug Back       Same Res'v       Diff R         Designate Type of Completion - (X)       Image: Completion - (X)       Imag	ion of tanks.		
Oil Well       Gas Well       New Well       Workover       Deepen       Hig Deep       Hig Deep         Designate Type of Completion - (X)       Date Compl. Ready to Prod.       Total Depth       P.B.T.D.         Date Spudded       Date Compl. Ready to Prod.       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 AND CEMENTING RECORD       Depth Casing Shoe	MPLETION DATA		
Date Spudded     Date Compl. Ready to Prod.     Total Depth     P.B. I.D.       Elevations (DF, RKB, RT, GR, etc.)     Name of Producing Formation     Top Oil/Gas Pay     Tubing Depth       Perforations     TUBING, CASING AND CEMENTING RECORD     Depth Casing Shoe			
Elevations (DF, RKB, RT, GR, etc.)     Name of Producing Formation     Top Oil/Gas Pay     Tubing Depth       Perforations     Depth Casing Shoe       TUBING, CASING AND CEMENTING RECORD       SACKS CEMENT	and the second		
Perforations			
TUBING, CASING AND CEMENTING RECORD       TUBING, CASING AND CEMENTING RECORD	18 (DF, RKB, RT, GR, etc.)		
DEPTH SET SACKS CEMENT	ânc		
DEPTH SET SACKS CEMENT			
	HOLE SIZE		
V. TEST DATA AND REQUEST FOR ALLOWABLE			
	SI DAIA AND REQUE /ELL (Test must be after		
Date First New Oil Run To Tank Date of Test			
Length of Test Tubing Pressure Casing Pressure Choke Size	of Test		
Water Bhis Gas- MCF			
Actual Prod. During Test Oil - Bbls. Water - Bols.	rod. During Test		
GAS WELL Gravity of Condensate			
GAS WELL Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate			
Turing Method (night back pre ) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size			
Testing Method (pitot, back pr.) Tubing Pressure (Snut-m)	Method (pilol, back pr.)		
VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION	PERATOR CERTIFIC		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above	I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above		
is true and complete to the best of my knowledge and belief. Date Approved	ue and complète to the best of my		
Chimal Churto By ORIGINAL SIGNED BY IFREY SEVICE	This. 11.0		
Signature DISTRICT I SUREPVICOP	Gature		
Rhonda Hunter Prod. Asst. Printed Name CO () (C ( ) ( ) Title / 3 / Title			
$\frac{1-2-4C}{\text{Date}} = \frac{16-167}{\text{Telephone No.}}$			

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.

Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each pool in multiply completed wells.