

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

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

John H. Hendrix Corporation

525 Midland Tower, Midland, Texas 79701

(Print or type name and address of owner or operator)

Well No. ☐ Change in Transporter of: ☐ (Please explain)

Recompletion ☐

Oil ☐

Dry Gas ☐

Change in Ownership ☒

Casinghead Gas ☐

Gas Breaker ☐

Effective 1/1/77

If change of ownership, give name and address of previous owner:

John H. Hendrix, 525 Midland Tower, Midland, Texas 79701

II. DESCRIPTION OF WELL AND LEASE

Lease Name Brunson C	Well No. 4	Pool Name, including Formation Blinebry Oil	Kind of Lease State, Federal or Fee Fee	Lease No.
Location: Unit: Letter J ; 1980 Feet From The South Line and 1980 Feet From The East Line of Section 3 Township 22-South Range 37-East , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually produced? 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	Re-Well	Makeover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Test Depth	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Test Oil/Gas Pay	Tubing Depth					
Perforations							Depth Casing Shoe	
TUBING, CASING, AND CEMENT								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be performed in accordance with Rule 1104 and must be reported to the Commission within 30 days of completion.)

Date First New Oil Run To Tanks	Date of Test	Actual Prod. During Test	Oil-Bbls.	Gas-MCF
Length of Test	Tubing Pressure	Choke Size		

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Initial Casinghead MCF	Gravity of Condensate
Testing Method (pitot, 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.

Leresa K. Wright
(Signature)

Production Clerk

(Title)

February 9, 1977

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19__

BY Jerry Sexton
Orig. Signed by
Dist. 1, Supv.

TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened 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 IV for changes of owner, well name or authorized transporter or other such change of condition.

NO. OF COPIES RECEIVED	
DATE RECEIVED	
SALE PRICE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
PRODUCTION OFFICE	

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

Form C-104
Supersedes C-104-1-1-67
Effective 1-1-68

I. Operator
John H. Hendrix Corporation
Address
525 Midland Tower, Midland, Texas 79701
Presently for filing (check proper box)
New Well ☐ Change in Transporter ☐ Other (Please explain)
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐ Effective 1/1/77
If change of ownership, give name and address of previous owner: John H. Hendrix, 525 Midland Tower, Midland, Texas 79701

II. DESCRIPTION OF WELL AND LEASE
Lease Name: Brunson C Well No.: 4 Pool Name, including Formation: Drinkard Kind of Lease: State, Federal or Fee Fee
Location
Unit Letter: J : 1980 Feet From The South Line and 1980 Feet From The East
Line of Section: 3 Township: 22-S Range: 37-E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Texas-New Mexico Pipeline Company Address (Give address to which approved copy of this form is to be sent)
P. O. Box 1510, Midland, Texas 79701
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒
Northern Natural Gas Company Address (Give address to which approved copy of this form is to be sent)
P. O. Box 308, Omaha, Nebraska 68101
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 Rest. Diff. Rest.
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 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 lead 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.
Linda K. Wright
(Signature)
Production Clerk
(Title)
January 18, 1977
(Date)
OIL CONSERVATION COMMISSION
APPROVED _____, 19____
BY _____
Original Signed By
Jerry Sexton
Dist. 1, Supv.
TITLE _____
This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened 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 such change of condition.