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Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

OIL CONSERVATION DIVISION

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I.

|  |              |
|--|--------------|
| Operator<br><b>John H. Hendrix Corporation</b>   | Well API No. |
| Address<br><b>223 W. Wall, Suite 525, Midland, TX 79701</b>  |              |
| Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain)<br>New Well <input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Re-establish Eunice, S. (San Andres)<br>Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> well had been TA'd<br>Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |              |
| If change of operator give name and address of previous operator   |              |

II. DESCRIPTION OF WELL AND LEASE

|  |                      |  |  |                              |
|--|----------------------|--|--|------------------------------|
| Lease Name<br><b>Elliott B-12-2</b>  | Well No.<br><b>2</b> | Pool Name, Including Formation<br><b>Eunice, S. (San Andres)</b> | Kind of Lease<br>State, Federal or Fee | Lease No.<br><b>LC064427</b> |
| Location<br>Unit Letter <b>E</b> : <b>1980</b> Feet From The <b>North</b> Line and <b>660</b> Feet From The <b>West</b> Line<br>Section <b>12</b> Township <b>22S</b> Range <b>37E</b> , NMPM, <b>Lea</b> County |                      |  |  |                              |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|  |   |   |
|--|---|---|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> <b>Permian</b>                                 | Address (Give address to which approved copy of this form is to be sent)<br><b>P. O. Box 1183, Houston, TX 77251-1183</b> |   |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent)<br><b>P. O. Box 3000, Tulsa, OK 74102</b>        |   |
| If well produces oil or liquids, give location of tanks.   | Unit <b>E</b> Sec. <b>12</b> Twp. <b>22S</b> Rge. <b>37E</b>  | Is gas actually connected? <b>Yes</b> When? <b>9/5/90</b> |
| If this production is commingled with that from any other lease or pool, give commingling order number: <b>PC-567</b>    |   |   |

IV. COMPLETION DATA

|                                     |                             |          |                 |          |        |                   |            |            |
|-------------------------------------|-----------------------------|----------|-----------------|----------|--------|-------------------|------------|------------|
| Designate Type of Completion - (X)  | Oil Well                    | Gas Well | New Well        | Workover | Deepen | 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 |          | 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 Tank<br><b>9/5/90</b> | Date of Test<br><b>9/5/90</b> | Producing Method (Flow, pump, gas lift, etc.)<br><b>Pumping</b> |                        |
| Length of Test<br><b>24</b>                     | Tubing Pressure<br><b>30</b>  | Casing Pressure<br><b>30</b>                                    | Choke Size<br><b>-</b> |
| Actual Prod. During Test                        | Oil - Bbls.<br><b>6</b>       | Water - Bbls.<br><b>33</b>                                      | Gas- MCF<br><b>10</b>  |

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. OPERATOR CERTIFICATE OF COMPLIANCE

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.

*Ronnie H. Westbrook*  
Signature  
**Ronnie H. Westbrook Vice-President**  
Printed Name  
**Sept. 24, 1990 (915) 684-6631**  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved

**SEP 26 1990**

By

**CRISTINA SIGNED BY JERRY BENTON**

Title

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

RECEIVED

SEP 25 1990

OCD  
HOBBS OFFICE

~~DAK~~ DAK

COMMINGLING ORDER PC- 567

Company                      Sohio Petroleum Co.  
Address                      P. O. Box 3000  
City, State, Zip      Midland, Texas    79702

Attention:      Mr. J. H. Walters

Lease Name:      Elliott B-12-2 #2  
Description:      SW/4 NW/4 of Sec. 12, T-22-S, R-37-E, Lea County

The above-named company is hereby authorized to commingle production from the following pools

South Eunice-San Andres, Drinkard, and Wantz-Granite Wash

in a common tank battery, and to determine the production from each pool by

\_\_\_\_\_ separately metering the production from each pool prior to commingling

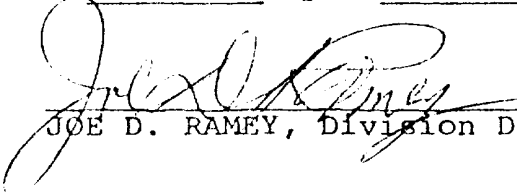
\_\_\_\_\_ separately metering the production from  
and determining the  
production by the subtraction method

X well tests (if this method is to be authorized, all commingled production must be of marginal nature; further, the operator shall notify the Santa Fe Office of the Division in the event any well producing into the commingled battery becomes capable of top allowable production, at which time the Division will amend this order or take such other action as may be appropriate)

Note: This installation shall be installed and operated in accordance with the applicable provisions of Rule 303 of the Division Rules and Regulations and the Division "Manual for the Installation and Operation of Commingling Facilities." It is the responsibility of the producer to notify the transporter of this commingling authority.

REMARKS:

DONE at Santa Fe, New Mexico, on this 5th day of June, 1979.

  
JOE D. RAMEY, Division Director

dr/

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SEP 21 1990

CC  
HOLDS SPACE

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City, State, Zip Midland, Texas 79702

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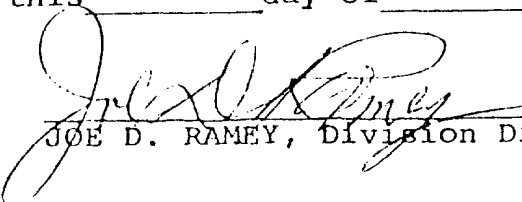
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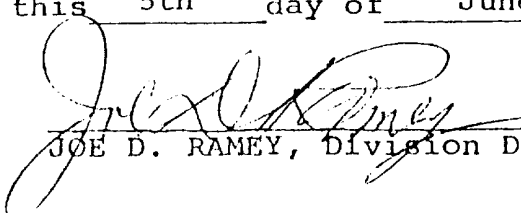
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