STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA FE		Γ	
FILE			
U.\$.0.\$.			
LAND OFFICE]	<u> </u>
TRANSPORTER	OIL		
	G AS	I^{-}	
OPERATOR			
PROBATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.				
Operator				
John H. Hendrix Corporation	•			
Address				
223 W. Wall, Suite 525, Midland, Texas 79701				
Reason(s) for filing (Check proper box) Other (Please explain)				
 	y Gas Effective May 1 1000			
- Netumpietus	Effective may 1, 1900			
Change in Ownership Casinghead Gas Co	ndensate			
If change of ownership give name and address of previous owner				
II. DESCRIPTION OF WELL AND LEASE				
Lease Name Well No. Pool Name, Including Fo	ormation Kind of Lease No.			
Sun Danglade 1 Blinebry Oil	& Gas State, Federal or Fee Fee			
Sun Danglade 1 Blinebry Oil	6 645			
Unit Letter L : 1980 Feet From The South Line and 660 Feet From The West				
Line of Section 13 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	Address (Give address to which approved copy of this form is to be sent)			
The Permian Corporation Box 1183, Houston, Texas 77251				
Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)				
El Paso Natural Gas Col	Jal, New Mexico			
If well produces oil or liquids,				
give location of tanks. L 13 22 37	Yes 1-8-71			
If this production is commingled with that from any other lease or pool, give commingling order number:				
NOTE: Complete Parts IV and V on reverse side if necessary.				
- COMPLIANCE	OIL CONSERVATION DIVISION			
VI. CERTIFICATE OF COMPLIANCE				
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED			
been complied with and that the information given is true and complete to the best of				
my knowledge and belief.	BY			
,	ORIGINAL SIGNED BY JERRY SEXTON			
1//	TITLE DISTRICT + SUPERVISOR			
This form is to be filed in compliance with RULE 1				
		(Signature)	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 AULE 111.	
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Production Assistant All sections of this form must be filled out completely for all				
(Title) able on new and recompleted wells.				
3/31/88 Fill out only Sections I, II, III, and VI for changes of c				
(Date) well name or number, or transporter, or other such change of con-				
Separate Forms C-104 must be filed for each pool completed wells.				

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