Submit 5 Copies
Appropriate District Office
DISTRICT J
P.O. Box 1980, Hobbs, NM 88240

Enc', Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	Т	OTRAN	ISPORT OIL	L AND NAT	URAL GA	\S	I BI KI:			
Operator ,					_	Well	API No.			
John H. Hendrix Co										
Addr&£3 W. Wall, Suite	525									
Midland, TX 79701 Reason(s) for Filing (Check proper box)				Othe	r (Please expla	in)				
New Well		Change in T	ransporter of:							
Recompletion.	Oil	,	Ory Gas						_	
Change in Operator	Casinghead	Gas 🛛 (Condensate		EFFECT	TIVE J	ANUARY	1, 199	0	
f change of operator give name and address of previous operator							· · · · · · · · · · · · · · · · · · ·			
•	LANDIEA	CIF.								
I. DESCRIPTION OF WELL Lease Name Parks "A"		Well No. Pool Name, Includi 4 Drinkard				Kind State,	Kind of LeaseFEE State, Federal or Fee		ase No.	
Location Unit Letter T	. 19	80	Feet From The S	South Lim	: and <u>66</u> 1	<u>j</u> F	eet From The _	East.	Line	
Section 14 Towns	20.0		Range 37-E		MFM, Lea				County	
	NICONOS POPULAR	OF OU	L AND NATE	IDAL CAS						
III. DESIGNATION OF TRA Name of Authorized Transporter of Oil		~ .		Address (Giv	e address to w	hich approve	d copy of this fo	orm is to be se	ni)	
Name of Authorized Transporter of Oil Texas New Mexico	Pipeli	ne					ew Mexi			
Name of Authorized Transporter of Car	Address (Give address to which approved copy of this form is to be sent)					nt)				
John H. Hendrix Corporation					223 W. Wall, Suite 525, Midland, Tx 797					
If well produces oil or liquids,		-		. Is gas actuall	y connected?	When	n 7			
rive location of tanks. I this production is commingled with the	P P	14	22-9 37-	oling order num	ber:				L.,	
V. COMPLETION DATA	iat from any one	i icase oi p	ooi, give communi	Pune olect pan						
		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completic		1			<u> </u>	<u></u>	J,	l	<u>.l</u>	
Date Spudded	Date Comp	I. Ready to	Prod.	Iotal Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	ons (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
Sievauons (LT, KKB, KI, OK, Ell.)										
Perforations				_,.\			Depth Casin	g Shoe		
	Ţ	TUBING, CASING AND			1 — — — — — — — — — — — — — — — — — — —			DAGUG GELIENIT		
HOLE SIZE	CAS	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		
				_			_			
				_						
V. TEST DATA AND REQU	EST FOR A	LLOWA	BLE							
OIL WELL (Test must be after	er recovery of to	tal volume o	of load oil and mu	si be equal to or	exceed top all	owable for 11	is depth or be	for full 24 hou	75.)	
Date First New Oil Run To Tank	Date of Tes	1		Producing M	ethod (Flow, p	ump, gas iyi,	eic.j			
Learth of Test	Tubine De-	Tubing Pressure Oil - Bbls.			Casing Pressure Water - Bbis.			Choke Size		
Length of Test	Tuoing 1 Tes									
Actual Prod. During Test	Oil - Bbls.							Gas- MCF		
•										
GAS WELL								٠		
Actual Prod. Test - MCF/D	Length of	Length of Test			Bbls. Condensate/MMCF			Gravity of Condensate		
								Choke Size		
Testing Method (pitot, back pr.)	Tubing Pre	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size		
VI. OPERATOR CERTIF	ICATE OF	COMP	LIANCE			(ICED)	ATION	חואופוכ	281	
I hereby certify that the rules and re	gulations of the	Oil Conserv	ation		OIL COI	NOEH A	A FEB	טוצוטוע	价	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				11	OIL CONSERVATION DIVISION FEB (10 10)					
1 - 0	\sim /			Date	e Approve	ed				
Kho la	Dun	to								
Signature	,			By_	4.	INIAL SECT	121, VI (134)	RY SEXT	N	
_ Rlionda Hunter	Р	rod. A				pistáií	TI SUPERV	ISOR		
Printed Name 2-2 90	915-684	-6631	Title	Title		907 W. # 288 **				
Date Date	713 004		phone 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.
- 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.