

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
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)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)  
Effective 4/1/87

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>E. W. Walden</u>	Well No. <u>4</u>	Pool Name, Including Formation <u>Drinkard</u>	Kind of Lease State, Federal or Fee <u>Fee</u>	Lease No.
Location Unit Letter <u>C</u> ; <u>660</u> Feet From The <u>North</u> Line and <u>2130</u> Feet From The <u>West</u> Line of Section <u>15</u> Township <u>22-S</u> Range <u>37-E</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS


Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Sun Refining and Marketing</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 2039, Tulsa, OK 74102</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>El Paso Natural Gas Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>Jal, New Mexico 88250</u>
If well produces oil or liquids, give location of tanks. Unit <u>C</u> Sec. <u>15</u> Twp. <u>22-S</u> Rge. <u>37-E</u>	Is gas actually connected? <u>Yes</u> When <u>3-4-78</u>

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.

VI. 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 is true and complete to the best of my knowledge and belief.

  
(Signature)  
Production Assistant  
(Title)  
March 23, 1987  
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 25 1987, 19\_\_\_\_

BY \_\_\_\_\_  
GENERAL SIGNED BY JERRY SEXTON  
TITLE DISTRICT SUPERVISOR

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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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)  
☐ New Well ☐ Change in Transporter of:  
☐ Recompletion ☒ Oil ☐ Dry Gas  
☐ Change in Ownership ☐ Casinghead Gas ☐ Condensate  
Other (Please explain)  
Effective 4/1/87

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name E. W. Walden	Well No. 4	Pool Name, Including Formation Tubb-Gas	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter C : 660 Feet From The North Line and 2130 Feet From The West Line of Section 15 Township 22 Range 37, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS


Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Sun Refining and Marketing	Address (Give address to which approved copy of this form is to be sent) Box 2039, Tulsa, OK 74102	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Enron	Address (Give address to which approved copy of this form is to be sent) 2130 N. Hwy. 83, Liberal, Kansas	
If well produces oil or liquids, give location of tanks. Unit C Sec. 15 Twp. 22 Rge. 37	Is gas actually connected? Yes	When 12-13-67

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.

VI. 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 is true and complete to the best of my knowledge and belief.

  
(Signature)  
Production Assistant  
(Title)  
March 23, 1987  
(Date)

OIL CONSERVATION DIVISION  
APPROVED MAR 25 1987, 19\_\_\_\_  
BY ORIGINAL SIGNED BY JERRY S. TON  
DISTRICT I SUPERVISOR  
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.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
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Page 1

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REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
John H. Hendrix Corporation

Address  
525 Midland Tower, Midland, Texas 79701

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain) EFFECTIVE 12/1/85
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	
	<input type="checkbox"/> Dry Gas	
	<input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner American International Energy Corp., 5701 Woodway, Suite 333, Houston, TX 77057

II. DESCRIPTION OF WELL AND LEASE

Lease Name E.W. Walden	Well No. / Pool Name, including Formation 4 / Drinkard	Kind of Lease State, Federal or Free FEE	Lease No.
Location			
Unit Letter C : 660 Feet From The North Line and 2100 Feet From The West			
Line of Section 15	Township 22-S	Range 37-E	NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2648, Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Jal, New Mexico 88250
If well produces oil or liquids, give location of tanks.	Unit, Sec., Twp., Rge., Is gas actually connected? When
C, 15, 22-S, 37-E	Yes, 3-4-78

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.

VI. 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 is true and complete to the best of my knowledge and belief.



(Signature)

Production Clerk

(Title)

December 16, 1985

(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 20 1985, 19

BY JONAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

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.  
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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.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

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C.C.D.  
HOBBS OFFICE

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2085

SANTA FE, NEW MEXICO 87501

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

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REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
John H. Hendrix Corporation

Address  
525 Midland Tower, Midland, Texas 79701

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

EFFECTIVE 12/1/85

If change of ownership give name and address of previous owner American International Energy Corp., 5701 Woodway, Suite 333, Houston, TX 77057

II. DESCRIPTION OF WELL AND LEASE

Lease Name E.W. Walden	Well No. 4	Pool Name, including Formation Tubb-Gas	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location					
Unit Letter <u>C</u> ; <u>660</u> Feet From The <u>North</u> Line and <u>2130</u> Feet From The <u>West</u>					
Line of Section <u>15</u> Township <u>22</u> Range <u>37</u> , NMPM, Lea County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Shell	P.O. Box 1509, Midland, Texas
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)
Northern Natural Gas Co.	2130 N. Hwy. 83, Liberal, Kansas
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: \_\_\_\_\_

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Shanda Huerta  
(Signature)  
Production Clerk  
(Title)  
12/16/85  
(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 20 1985, 19

BY JERRY SEXTON  
TITLE DISTRICT SUPERVISOR

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Form C-104-1  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Name of Owner	
American International Energy Corporation	
Address	
5701 Woodway, Suite 333, Houston, Texas 77057	
Reason(s) for filing (Check proper box)	
<input type="checkbox"/> New Well	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinthead Gas <input type="checkbox"/> Condensate
<input type="checkbox"/> Reconpletion	
<input checked="" type="checkbox"/> Change in Ownership	
Name of new owner (if change of ownership)	
Sun Exploration & Production Co.	
Address of previous owner	
P.O. Box 1861, Midland, TX 79702	

DESCRIPTION OF WELL AND LEASE			
Well Name	Well No., Prod. Name, including Formation	Kind of Lease	Lease No.
E.W. Walden	4 Tubb-Gas	State, Federal or Fee Fee	
Location	Unit Letter C : 660 Feet From The North Line and 2130 Feet From The West	Line of Section 15 Township 22 Range 37 N.M.P.M.	Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
Shell	P.O. Box 1509, Midland, Texas		
Name of Authorized Transporter of Casinthead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
Northern Natural Gas	2130 N. Hwy 83, Liberal, Kansas		
Well produces oil or liquids, location of leases.	Unit C	Sec. 15	Twp. 22 Rge. 37
Is gas actually connected?	When		

Is production commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

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 is true and complete to the best of my knowledge and belief.

*Thonda Hunter*  
(Signature)  
Production Clerk  
(Title)  
July 23, 1985  
(Date)

OIL CONSERVATION DIVISION

APPROVED *July 23, 1985*, 19  
BY  
TITLE

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

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ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P O BOX 2085  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format CG-21-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator  
American International Energy Corporation  
5701 Woodway, Suite 333, Houston, Texas 77057

Reason(s) for filing (Check proper box)

- ☐ New Well  
☐ Reconvenation  
☒ Change in Ownership

Change in Transporter of:

- ☐ Oil  
☐ Gas  
☐ Condensate

Other (Please explain)

Change of ownership give name and address of previous owner  
Sun Exploration & Production Co.  
P.O. Box 1861, Midland, TX 79702

DESCRIPTION OF WELL AND LEASE

Well Name  
E.W. Walden  
Location  
Unit Letter C : 660 Feet From The North Line and 2130 Feet From The West  
Line of Section 15 Township 22-S Range 37-E  
Lease No. 4 Drinkard  
State, Federal or Fee Fee  
County Lea

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate  
Shell Pipeline Company  
Address (Give address to which approved copy of this form is to be sent)  
P.O. Box 2648, Houston, TX 77001  
Name of Authorized Transporter of Gas or Dry Gas  
El Paso Natural Gas Company  
Address (Give address to which approved copy of this form is to be sent)  
Jal, New Mexico 88250  
Well produces oil or liquids, or location of tanks.  
Unit C Sec. 15 Twp. 22-S Rge. 37-E  
Is gas actually connected? Yes  
When 3-4-78  
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.

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 is true and complete to the best of my knowledge and belief.

*Rhonda Hunter*  
(Signature)

Production Clerk

(Title)

May 23, 1985

(Date)

OIL CONSERVATION DIVISION

APPROVED *May 28 1985*  
BY  
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.  
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