STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT Form C-104 Revised 10-01-78 -----Format 06-01-63 DISTRIBUTION **OIL CONSERVATION DIVISION** Page 1 BANTA PE P. O. BOX 2088 FILE SANTA FE, NEW MEXICO 87501 U.I.C.4 LAND OFFICE OIL TRANSPORTER REQUEST FOR ALLOWABLE 0 ... OPERATOR AND PROMATION OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator John H. Hendrix Corporation Address 223 W. Wall, Suite 525, Midland, Texas 79701 Other (Please explain) Reoson(s) for liling (Check proper box) New Well Channe in Transporter of: Effective 10/1/88 Dry Gas lou Recompletion Condensate Change in Ownership Casinghead Gas Veirs Production Company, 223 W. Wall, Suite 500, Midland, Texas 7970 If change of ownership give name and address of previous owner. II. DESCRIPTION OF WELL AND LEASE Well No. | Pool Name, Including Formation Kind of Leose Lease No. Lease Name State, Federal or Fee State Amoco State T 1Y Paddock, South Location Feel From The South Line and 1880 Feet From The West : 2080 Unit Letter K County 32 22S 38E , NMPM. Range Township Lea Line of Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) ox 1510, Midland, Texas 79701 Texas New Mexico Pipeline Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas Teaco Producing Inc. Box 3000, Tulsa, Oklahoma 74102 When Is gas actually connected? Sec. Twp. Rqe. • . Unit If well produces oil or liquids, give location of tanks. 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 (Tille)

> 3/31/88 (Date)

OIL	CONSERVATIO	IN DIVISION
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APPROVED

ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR

TITLE _

BY

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 MULE 111.

All sections of this form must be filled out completely for allow-able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, ill 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.