

OIL CONSERVATION DIVISION

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator	John H. Hendrix Corporation	Well API No.
Address	223 W. Wall, Suite 525 Midland, TX 79701	
Reason(s) for Filing (Check proper box)		<input type="checkbox"/> Other (Please explain)
New Well	<input type="checkbox"/>	
Recompletion	<input type="checkbox"/>	
Change in Operator	<input checked="" type="checkbox"/>	
Change in Transporter of:		
Oil	<input type="checkbox"/>	
Dry Gas	<input type="checkbox"/>	
Casinghead Gas	<input type="checkbox"/>	
Condensate	<input type="checkbox"/>	
EFFECTIVE MARCH 1, 1989		
If change of operator give name and address of previous operator		
<del>Maboo Petroleum Corp., 400 W. Illinois, Suite 1500, Midland, TX 79701</del>		

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Belcher	1	S. Brunson Drinkard-Abo	FEE	
Location				
Unit Letter	M	660	Feet From The	South
		660	Feet From The	West
Section	7	Township	22S	Range
		38E	NMPM,	Lea
		County		

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	Address (Give address to which approved copy of this form is to be sent)					
Enron Oil Trading & Transp. Co.	Box 1188, Houston, Tx. 77251-1188					
Name of Authorized Transporter of Casinghead Gas	Address (Give address to which approved copy of this form is to be sent)					
Warren Petroleum Corp.	Box 1589, Tulsa, Ok. 74102					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
	M	7	22S	38E	Yes	7/25/68

If this production is commingled with that from any other lease or pool, give commingling order number: R-7536, Case No. 8179, May 21, 1984

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

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.

Signature Rhonda Hunter  
Printed Name Rhonda Hunter  
Date 4-5-89  
Title Production Asst.  
Telephone No. 915-684-6631

OIL CONSERVATION DIVISION

Date Approved APR 7 1989  
By ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR  
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

APR 6 1989

OCD  
HOUSE OF REPRESENTATIVES

## OIL CONSERVATION DIVISION

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P.O. Box 2088

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### REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator	John H. Hendrix Corporation 223 W. Wall, Suite 525	Well API No.
Address	Midland, TX 79701	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	EFFECTIVE MARCH 1, 1989
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator <u>Citation Oil &amp; Gas Corp.</u> <u>Mabee Petroleum Corp., 400 W. Illinois, Suite 1500, Midland, TX 79701</u>		

### II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	FEE	Lease No.
Belcher	1	Blinbry Oil & Gas	State, Federal or Fee		
Location					
Unit Letter <u>M</u> : <u>660</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line					
Section <u>7</u> Township <u>22S</u> Range <u>38E</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"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Enron Oil Trading &amp; Transportation Co.</u>	<u>Box 1188, Houston, Texas 77251-1188</u>
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)
<u>Warren Petroleum Corp.</u>	<u>Box 1589, Tulsa, OK 74102</u>
If well produces oil or liquids, give location of tanks.	Unit   Sec.   Twp.   Rge.   Is gas actually connected?   When ?
	<u>M</u>   <u>7</u>   <u>22S</u>   <u>38E</u>   <u>Yes</u>   <u>7/25/68</u>

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### GAS WELL

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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.

Rhonda Hunter  
Signature  
Rhonda Hunter Production Asst.  
Printed Name  
Date 4-5-89 Telephone No. 915-684-6631

### OIL CONSERVATION DIVISION

Date Approved APR 7 1989

By ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

Title \_\_\_\_\_

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