

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

OIL CONSERVATION DIVISION

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

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"/>	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 Citation Oil & Gas Corp. Mabee Petroleum Corp., 400 W. Illinois, Suite 1500, Midland, Tx 79701		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Belcher "A"	Well No. 1	Pool Name, Including Formation Blinbry Oil & Gas	Kind of Lease FFS State, Federal or Fed	Lease No.
Location Unit Letter N : 1980 Feet From The West Line and 660 Feet From The South Line Section 7 Township 22S Range 38E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> Enron Oil Trading & Transportation Co.	Address (Give address to which approved copy of this form is to be sent) Box 1188, Houston, Texas 77251-1188	
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) Box 1589, Tulsa, Ok. 74102	
If well produces oil or liquids, give location of tanks.	Unit N Sec. 7 Twp. 22S Rge. 38E	Is gas actually connected? Yes When? 9/11/68
If this production is commingled with that from any other lease or pool, give commingling order number: DHC R-7911		

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.

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

OIL CONSERVATION DIVISION
APR 7 1989

Date Approved _____
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.

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

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

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

State of New Mexico
gy, Minerals and Natural Resources Departn

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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Operator John H. Hendrix Corporation 223 W. Wall, Suite 525 Midland, TX 79701	Well API No.
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	EFFECTIVE MARCH 1, 1989
If change of operator give name and address of previous operator Habco Petroleum Corp., 100 W. Illinois, Suite 1500, Midland, Tx 79701	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Belcher "A"	Well No. 1	Pool Name, Including Formation S. Brunson Drinkard-Abo	Kind of Lease FEE -State, Federal or Fee	Lease No.
Location Unit Letter N : 1980 Feet From The West Line and 660 Feet From The South Line Section 7 Township 22S Range 38E , 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"/> Enron Oil Trading & Transportation Co.	Address (Give address to which approved copy of this form is to be sent) Box 1188, Houston, Texas 77251-1188
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corp.	Address (Give address to which approved copy of this form is to be sent) Box 1589, Tulsa, Ok. 74102
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When ? N 7 22S 38E Yes 9/11/68
If this production is commingled with that from any other lease or pool, give commingling order number: DHC R-7991	

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.

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

OIL CONSERVATION DIVISION

APR 7 1989

Date Approved

By **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

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

State of New Mexico
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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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

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: <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/>
EFFECTIVE MARCH 1, 1989	
If change of operator give name and address of previous operator Citation Oil & Gas Corp. Mabee Petroleum Corp., 400 W. Illinois, Suite 1500, Midland, Tx 79701	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Belcher "A"	Well No. 1	Pool Name, including Formation Tubb	Kind of Lease FFS State, Federal or Fee	Lease No.
Location Unit Letter N : 1980 Feet From The West Line and 660 Feet From The South Line Section 7 Township 22S Range 38E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> Effective 1-1-93	Address (Give address to which approved copy of this form is to be sent) Box 1188, Houston, Texas 77251-1188
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) Box 1589, Tulsa, OK 74102
If well produces oil or liquids, give location of tanks. Unit N Sec. 7 Twp. 22S Rge. 38E	Is gas actually connected? Yes When? 9/11/68

If this production is commingled with that from any other lease or pool, give commingling order number: **DHC R-7911**

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** Production Asst
Printed Name **Rhonda Hunter** Title
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

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

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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 223 W. Wall, Suite 525 Midland, TX 79701	Well API No.
Reason(s) for Filing (Check proper box)		EFFECTIVE MARCH 1, 1989
New Well	<input type="checkbox"/>	
Recompletion	<input type="checkbox"/>	
Change in Operator	<input checked="" type="checkbox"/>	
If change of operator give name and address of previous operator		

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Belcher "A"	1	S. Brunson Drinkard-Abo	FEE -State, Federal or Fee	
Location				
Unit Letter N : 1980 Feet From The West Line and 660 Feet From The South Line				
Section 7 Township 22S Range 38E, NMPM, Lea County				

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)				
Enron Oil Trading & Transportation Co.		Box 1188, Houston, Texas 77251-1188				
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)				
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?
	N	7	22S	38E	Yes	9/11/68

If this production is commingled with that from any other lease or pool, give commingling order number: DHC R-7991

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		OIL CONSERVATION DIVISION	
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.		APR 7 1989	
Signature Rhonda Hunter		Date Approved	
Printed Name Rhonda Hunter		By ORIGINAL SIGNED BY JERRY SEXTON	
Date 4-5-89		DISTRICT I SUPERVISOR	
Telephone No. 915-684-6631		Title	

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RECEIVED

APR 6 1989

OCD
HOBBS OFFICE

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. 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"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	EFFECTIVE MARCH 1, 1989
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Change in Operator <input checked="" type="checkbox"/>		
If change of operator give name and address of previous operator Citation Oil & Gas Corp. Mabee Petroleum Corp., 400 W. Illinois, Suite 1500, Midland, Tx 79701		

II. DESCRIPTION OF WELL AND LEASE		Lease No.
Lease Name Belcher "A"	Well No. 1	Kind of Lease Fee State, Federal or Fee
Pool Name, including Formation Blinebry Oil & Gas		
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Section 7 Township 22S Range 38E NMPM, Lea County		

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If well produces oil or liquids, give location of tanks.	Unit N	Sec. 7	Twp. 22S	Rge. 38E	Is gas actually connected? Yes	When? 9/11/68
If this production is commingling with that from any other lease or pool, give commingling order number: DHC R-7911						

IV. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Designate Type of Completion - (X)									
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			

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Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate
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Signature Rhonda Hunter	Production Asst.
Printed Name 4-5-89	Title 915-684-6631
Date	Telephone No.

OIL CONSERVATION DIVISION APR 7 1989	
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Title	

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Operator John H. Hendrix Corporation 223 W. Wall, Suite 525 Midland, TX 79701	Well API No.
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> EFFECTIVE MARCH 1, 1989 Change in Operator <input checked="" type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
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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			
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HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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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

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Rhonda Hunter
Signature

Rhonda Hunter
Printed Name

4-5-89
Date

Production Asst
Title

915-684-6631
Telephone No.

OIL CONSERVATION DIVISION

Date Approved **APR 7 1989**

By **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR

Title

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