from 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

DISTRICTA P.O. Drawer DD, Artesia, NM 88210

DISTRICTIII 1000 Rio Biazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

John H. Hendrix Corporation  Address W. Wall, Suite 525  Midland, TX 79701	
Addrag W. Wall, Suite 525	025-23724
ritutanu, in 19101	
Reason(x) for Filing (Check proper box)  Other (Please explain)	
The state of the s	
Recompletion Oil Change in Transporter of: Effective 10/1/91	
Change In Operator XX. Casinghead Gas [ Condensate []	
If change of operator give name and address of previous operator  Meridian Oil Inc., 21 Desta Drive, Midland, TX	79705
II. DESCRIPTION OF WELL AND LEASE	Pla !
Lease Name    Well No.   Post Name, Including Formation   Kind of Lease F]   Will Correct   Control   Cont	EE Lesso No.
Will Cary 9 South McCormick Silurian State, Federal or F	
Location	
Unit Letter E : 1650 Feet From The North Line and 660 Feet From The	WestUne
Section 22 Township 22-S Range 37-E , NMPM,	Lea County
Section Township - Range 3. 13 juntary	0+
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS (TEMPS, ASSESSMENT)	MEDI AL
Name of Authorized Transporter of Oil or Condensate Address (Give address to which ama oved copy of this	form is to be sent)
Name of Authorized Transporter of Casinghead Gas or Dry Gas [ ] Address [Give address to which approved copy of this	form is to be sent)
If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When ?	
hive location of tanks.	
If this production is commingled with that from any other lease or pool, give commingling order number:	
IV. COMPLETION DATA	
	Same Res'v Diff Res'v
Designate Type of Completion - (X)	I I
Date Spaulded Date Compt. Ready to Prod. Total Depth P.B.T.D.	
Date Springer Transfer Transfe	•
Elevations (DF, RKB, RT, GR, etc.) Name of Froducing Formation Top Oil/Gas Fay Tubing De	nth.
ranie of Frontieng Formation	pun
Perforations Depth Cast	Ing Shoe
	g once
THERMAL CLASSICS AND COLUMN TRACTORS	
TUBING, CASING AND CEMENTING RECORD	DAGUE OF LIFT
HOLE SIZE CASING & TUBING SIZE DEPTH SET	SACKS CEMENT
WERE KITTIANIS RESULES FOR ALL SIVANI S	
V. TEST DATA AND REQUEST FOR ALLOWABLE	C. (1241)
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 hows.)
	for full 24 hows.)
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 Date First New Oil Run To Tank  Date of Test	
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OIL WELL (Test must be after recovery of total volume of load oil and must be equal to an exceed top allowable for this depth or be Date First New Oil Run To Tank Date of Test Producing Method (Flow, pump, gas 19, etc.)  Length of Test Tubing Pressure Casing Pressure	
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 Date First New Oil Run To Tank  Date of Test  Length of Test  Tubing Pressure  Casing Pressure  Choke Size	
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OIL VELL  (Test must be after recovery of total volume of load oil and must be equal to an exceed top allowable for this depth or be Date First New Oil Run To Tank  Date of Test  Length of Test  Tubing Pressure  Oil - Bbls.  Oil - Bbls.  Oil - Bbls.  Oil - Bbls.  Dibls. Condensate/MMCF  Oravity of the condensate/MMCF  Oravity of the condensate/MMCF  Oravity of the condensate/MMCF	Condensate
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OIL VELL  (Test must be after recovery of total volume of load oil and must be equal to an exceed top allowable for this depth or be Date First New Oil Run To Tank  Date of Test  Length of Test  Tubing Pressure  Oil - Bbls.  Oil - Condensate/MMCF  Oil - C	Condensate
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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 Date First New Oil Run To Tank  Date of Test  Length of Test  Lubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Actual Prod. During Test  Oil - Bbls.  Water - Bbls.  Gas WELL  Actual Prod. Test - MCF/D  Length of Test  Iblic. Condensate/MMCF  Gravity of Casing Method (pitot, back pr.)  Tubing Fressure (Shut-in)  VI. OPERATOR CERTIFICATE OF COMPLIANCE  Thereby 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.  Date Approved  Date Approved	Condensate
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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 Date First New Oil Run To Tank  Date of Test  Date o	DIVISION

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.