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TRANSPORTER	OIL		
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OPERATOR			
PROBATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE Effective 1-1-65 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS I. Operator John H. Hendrix 316 Central Bldg., Midland, Texas 79701 Other (Please explain) Reason(s) for filing (Check proper box) 4/23/22 Change in Transporter of: New Well Dry Gas Oil Recompletion Condensate Change in Ownership Casinahead Gas THIS WILL IMA TERM PLANED A THE YOUR If change of ownership give name and address of previous owner \_\_\_ NUMBER BLES OF HILL II. DESCRIPTION OF WELL AND LEASE Kind of Lease Lease No. Pool Name, Including Formation State, Federal or Fee 700 Wantz Granite Wash 3 Cossatot "B" Location 2080 West South 330 Feet From The Townshi 22 South Range 37 Last Lea County 12 NMPM. 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) Name of Authorized Transporter of Oil P.O. Box 1183, Houston Texas 77001 The Permian Corporation Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas () or Dry Gas creage is not covered by casinghead gas contract. Is gas actually connected? When Unit If well produces oil or liquids, give location of tanks. N If this production is commingled with that from any other lease or pool, give commingling order number: Commingled IV. COMPLETION DATA Plug Back | Same Restv. Diff. Restv. New Well Workover Gas Well Oil Well Designate Type of Completion - (X) P.B.T.D. Total Depth Date Compl. Ready to Prod. 7445 <u>7433</u> 2-23-72 2-11-71 levations (DF, RKB, RT, GR, etc.) Ton Oil/Gas Pay Tubing Depth 7360 7176 Granite Wash 7176,7185,7217,7261,7343,7350,7357,7367,7376,7390 <del>7420</del> TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET HOLE SIZE CASING & TUBING SIZE 400 1190 630 (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Clowing 2-23-72 Length of Test Choke Size Actual Prod. During Test Oil - Bbla -59 **GAS WELL** Gravity of Condensate Bbls. Condensate/MMCF Length of Test Actual Prod. Test-MCF/D Casing Pressure (Shut-in) Choke Size Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. DISTRICT I 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. <del>JDe::800</del>f

(Title)

(Date)

2-24-72

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.

No. 1

REELE W. D

FEB 2 / 1022

OIL CONSERVATION COMM. HOBBS, N. M.