

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

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

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

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

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 checked="" type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	Name change from Polaris Parks No. 8
Recompletion <input checked="" type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>	to Parks "A" No. 8
Change in Operator <input type="checkbox"/>	Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Parks "A"	Well No. 8	Pool Name, Including Formation Blinebry	Kind of Lease State, Federal or <input checked="" type="radio"/> Fee	Lease No.
Location Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East Line Section 14 Township 22S Range 37E , 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"/> Texas-New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2528, Hobbs, NM 88240	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Northern Natural Gas	Address (Give address to which approved copy of this form is to be sent) 223 Dodge Street, Omaha, NE 68102	
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 14
	Twp. 22S	Rge. 37E
Is gas actually connected? Yes		When? 1/24/90
If this production is commingled with that from any other lease or pool, give commingling order number: PC-752		

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back <input checked="" type="checkbox"/>	Same Res'v	Diff Res'v <input checked="" type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod. 1/22/90		Total Depth 6500'		P.B.T.D. 6200'			
Elevations (DF, RKB, RT, GR, etc.) 3341' DF	Name of Producing Formation Blinebry		Top Oil/Gas Pay 5424'		Tubing Depth 5351'			
Perforations 5513, 19, 30, 39, 73, 82, 92, 98, 5612, 21, 42, 75, 80, 5703, 10, 32, 59, 87, 94 & 5802'					Depth Casing Shoe 6500'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8-5/8"		1095'		500			
7-7/8"	5-1/2"		6500'		200			

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 1/24/90	Date of Test 1/29/90	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24	Tubing Pressure 100 PSIG	Casing Pressure Pkr.	Choke Size 24/64"
Actual Prod. During Test	Oil - Bbls. 11	Water - Bbls. 36	Gas - MCF 390

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.

Ronnie H. Westbrook
Signature
Ronnie H. Westbrook Vice-President
Printed Name
1/31/90 **915 684-6631**
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved **FEB 06 1990**
ORIGINAL SIGNED BY JERRY SEXTON
By **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.