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

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	Well API No.
John H. Hendrix Corporation	
Address 223 W. Wall, Suite 525 Midland, TX 79701	

Reason(s) for Filing (Check proper box)

- New Well [ ]
- Recompletion [ ]
- Change in Operator [ ]
- Change in Transporter of: Oil [ ] Dry Gas [ ] Casinghead Gas [X] Condensate [ ]
- Other (Please explain): Effective 11/1/91

If change of operator give name and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No.
Cossatot C	3	Paddock	FEE	

Location

Unit Letter J : 1650 Feet From The South Line and 2210 Feet From The East Line

Section 24 Township 22-S Range 37-E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate	Address (Give address to which approved copy of this form is to be sent)
[X] Scurlock Permian Corporation	Box 4648, Houston, TX 77210-4648
Name of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ]	Address (Give address to which approved copy of this form is to be sent)
Sid Richardson Carbon & Gasoline Co.	201 Main Street, Ft. Worth, TX 76102

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?

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

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	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		
Perforations			Depth Casing Shoe

TUBING, CASING A

HOLE SIZE	CASING & TUBING SIZE	KS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and r

Date First New Oil Run To Tank	Date of Test	(24 hours)
Length of Test	Tubing Pressure	
Actual Prod. During Test	Oil - Bbls.	

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Gravity
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	

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

Rhonda Hunter Prod. Asst.
Printed Name Title

10-31-91 915-684-6631
Date Telephone No.

SION

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By Orig. Signed by Paul Kautz Geologist

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.