

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO  
APPLICATION FOR MULTIPLE COMPLETION

Form C-107  
5-1-61

|                                                           |                   |                              |                                 |
|-----------------------------------------------------------|-------------------|------------------------------|---------------------------------|
| Operator<br><b>John H. Hendrix</b>                        |                   | County<br><b>Lea</b>         | Date<br><b>January 10, 1973</b> |
| Address<br><b>403 Wall Towers West, Midland, TX 79701</b> |                   | Lease<br><b>Cossatot "C"</b> | Well No.<br><b>4</b>            |
| Location of Well<br><b>0</b>                              | Unit<br><b>24</b> | Township<br><b>22 South</b>  | Range<br><b>37 East</b>         |

1. Has the New Mexico Oil Conservation Commission heretofore authorized the multiple completion of a well in these same pools or in the same zones within one mile of the subject well? YES ☒ NO ☐

2. If answer is yes, identify one such instance: Order No. **R-3422**; Operator Lease, and Well No.: **Hanson Oil Corporation's Max Gutman Unit N, Sec. 19, T22S, R38E**

| 3. The following facts are submitted:                | Upper Zone                                   | Intermediate Zone | Lower Zone                     |
|------------------------------------------------------|----------------------------------------------|-------------------|--------------------------------|
| a. Name of Pool and Formation                        | <b>Drinkard</b>                              |                   | <b>E. Brunson Granite Wash</b> |
| b. Top and Bottom of Pay Section (Perforations)      | <b>6218-6983<br/>(Proposed Perforations)</b> |                   | <b>7156'-7412'</b>             |
| c. Type of production (Oil or Gas)                   | <b>Gas</b>                                   |                   | <b>Oil</b>                     |
| d. Method of Production (Flowing or Artificial Lift) | <b>Flowing</b>                               |                   | <b>Flowing</b>                 |

4. The following are attached. (Please check YES or NO)

| Yes                                 | No                                  |                                                                                                                                                                                                                                                                                                                                                                                                 |
|-------------------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | a. Diagrammatic Sketch of the Multiple Completion, showing all casing strings, including diameters and setting depths, centralizers and/or turbolizers and location thereof, quantities used and top of cement, perforated intervals, tubing strings, including diameters and setting depth, location and type of packers and side door chokes, and such other information as may be pertinent. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | b. Plat showing the location of all wells on applicant's lease, all offset wells on offset leases, and the names and addresses of operators of all leases offsetting applicant's lease.                                                                                                                                                                                                         |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | c. Waivers consenting to such multiple completion from each offset operator, or in lieu thereof, evidence that said offset operators have been furnished copies of the application.*                                                                                                                                                                                                            |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | d. Electrical log of the well or other acceptable log with tops and bottoms of producing zones and intervals of perforation indicated thereon. (If such log is not available at the time application is filed it shall be submitted as provided by Rule 112-A.)                                                                                                                                 |

5. List all offset operators to the lease on which this well is located together with their correct mailing address.

|                                   |                                  |                                  |
|-----------------------------------|----------------------------------|----------------------------------|
| <b>Crown Central Petroleum</b>    | <b>1010 Bank of The SW Bldg.</b> | <b>Houston, Texas 77002</b>      |
| <b>Marathon Oil Company</b>       | <b>P. O. Box 552</b>             | <b>Midland, Texas 79760</b>      |
| <b>Phillips Petroleum Company</b> | <b>Phillips Building</b>         | <b>Odessa, Texas 79760</b>       |
| <b>Gulf Oil Corporation</b>       | <b>P. O. Box 1150</b>            | <b>Midland, Texas 79760</b>      |
| <b>Texas Pacific Oil Company</b>  | <b>P. O. Box 4067</b>            | <b>Midland, Texas 79760</b>      |
| <b>Hanson Oil Corporation</b>     | <b>Petroleum Building</b>        | <b>Roswell, New Mexico 88201</b> |

6. Were all operators listed in Item 5 above notified and furnished a copy of this application? YES ☒ NO ☐. If answer is yes, give date of such notification **January 10, 1973**.

CERTIFICATE: I, the undersigned, state that I am the **Accountant** of the **John H. Hendrix** (company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

  
Signature **Paula W. Pendleton**

\*Should waivers from all offset operators not accompany an application for administrative approval, the New Mexico Oil Conservation Commission will hold the application for a period of twenty (20) days from date of receipt by the Commission's Santa Fe office. If, after said twenty-day period, no protest nor request for hearing is received by the Santa Fe office, the application will then be processed.

NOTE: If the proposed multiple completion will result in an unorthodox well location and/or a non-standard proration unit in one or more of



OFFICE PHONE 684-8961  
RESIDENCE PHONE 684-6818

**JOHN H. HENDRIX**

OIL PRODUCER

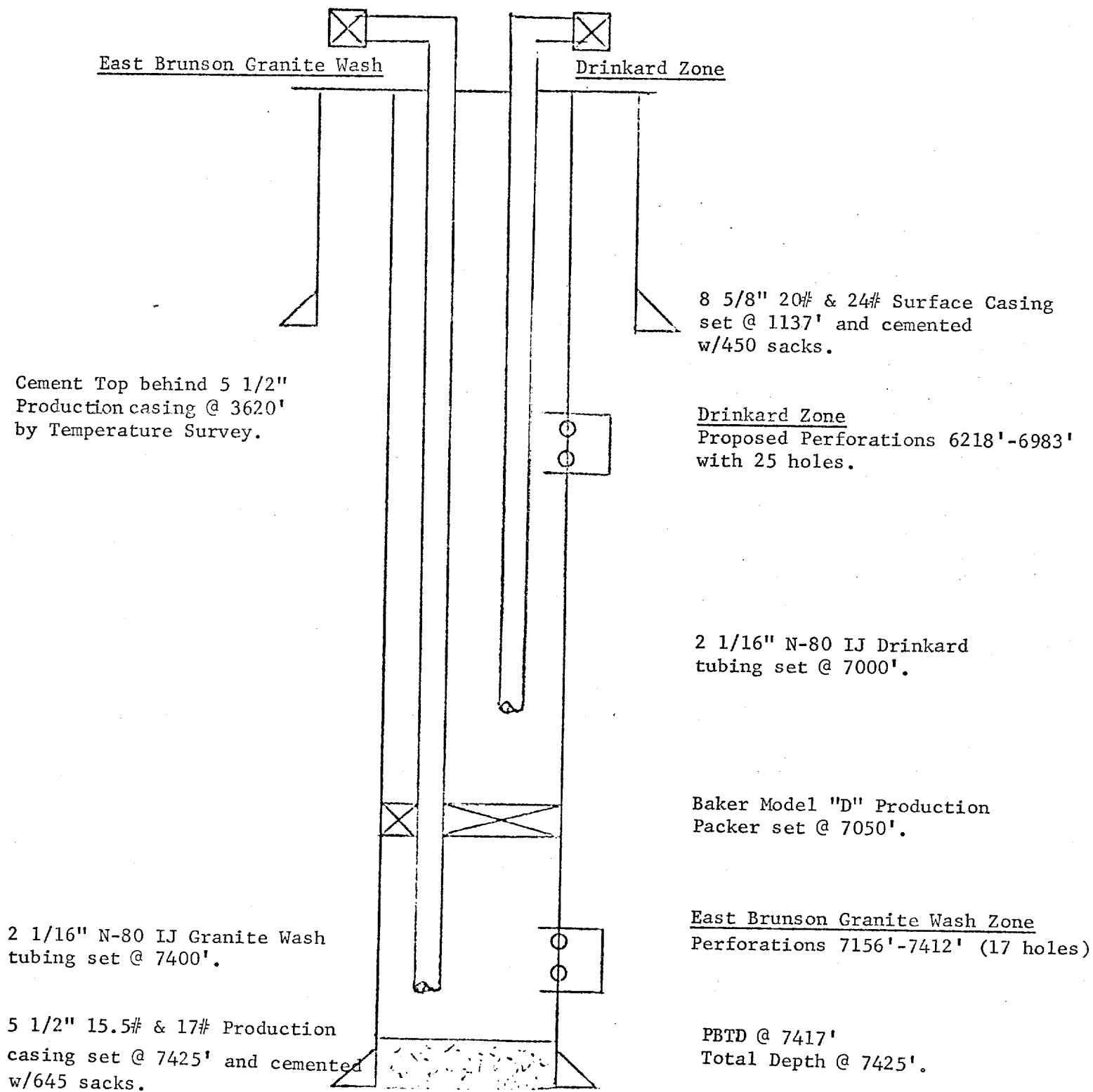
403 WALL TOWERS WEST

MIDLAND, TEXAS 79701

Diagrammatic Sketch

Cossatot "C" No. 4

660' FSL & 1980' FEL Section 24  
T22S, R37E



T  
22  
S

Tom  
Lineberry's  
Lots 1, 4, 5, 6

32°20'

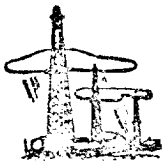
1

Tom

Lineberry 13  
LLB

Tom  
Lineberry





OFFICE PHONE 684-8861  
RESIDENCE PHONE 684-6818

**JOHN H. HENDRIX**  
OIL PRODUCER  
403 WALL TOWERS WEST  
MIDLAND, TEXAS 79701

RECEIPT FOR CERTIFIED MAIL—30¢

No. 989431

|                                                                                                        |                                                |                                  |
|--------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------|
| SENT TO                                                                                                |                                                | POSTMARK<br>OR DATE              |
| CROWN CENTRAL PETROLEUM                                                                                |                                                |                                  |
| STREET AND NO.<br>1010 Bank of the SW Building                                                         |                                                |                                  |
| P. O., STATE, AND ZIP CODE<br>Houston, TX 77002                                                        |                                                |                                  |
| EXTRA SERVICES FOR ADDITIONAL FEES                                                                     |                                                |                                  |
| Return Receipt<br>Shows to whom<br>and date<br>delivered                                               | Shows to whom,<br>date, and where<br>delivered | Deliver to<br>Addressee Only     |
| <input type="checkbox"/> 10¢ fee                                                                       | <input type="checkbox"/> 35¢ fee               | <input type="checkbox"/> 50¢ fee |
| POD Form 3800 Mar. 1966 NO INSURANCE COVERAGE PROVIDED—<br>NOT FOR INTERNATIONAL MAIL (See other side) |                                                |                                  |

RECEIPT FOR CERTIFIED MAIL—30¢

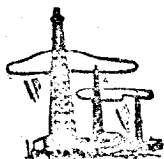
No. 989428

|                                                                                                        |                                                |                                  |
|--------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------|
| SENT TO                                                                                                |                                                | POSTMARK<br>OR DATE              |
| Marathon Oil Company                                                                                   |                                                |                                  |
| STREET AND NO.<br>P. O. Box 552                                                                        |                                                |                                  |
| P. O., STATE, AND ZIP CODE<br>Midland, TX 79701                                                        |                                                |                                  |
| EXTRA SERVICES FOR ADDITIONAL FEES                                                                     |                                                |                                  |
| Return Receipt<br>Shows to whom<br>and date<br>delivered                                               | Shows to whom,<br>date, and where<br>delivered | Deliver to<br>Addressee Only     |
| <input type="checkbox"/> 10¢ fee                                                                       | <input type="checkbox"/> 35¢ fee               | <input type="checkbox"/> 50¢ fee |
| POD Form 3800 Mar. 1966 NO INSURANCE COVERAGE PROVIDED—<br>NOT FOR INTERNATIONAL MAIL (See other side) |                                                |                                  |

RECEIPT FOR CERTIFIED MAIL—30¢

No. 989429

|                                                                                                        |                                                |                                  |
|--------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------|
| SENT TO                                                                                                |                                                | POSTMARK<br>OR DATE              |
| PHILLIPS PETROLEUM COMPANY                                                                             |                                                |                                  |
| STREET AND NO.<br>Phillips Building                                                                    |                                                |                                  |
| P. O., STATE, AND ZIP CODE<br>Odessa, Texas 79760                                                      |                                                |                                  |
| EXTRA SERVICES FOR ADDITIONAL FEES                                                                     |                                                |                                  |
| Return Receipt<br>Shows to whom<br>and date<br>delivered                                               | Shows to whom,<br>date, and where<br>delivered | Deliver to<br>Addressee Only     |
| <input type="checkbox"/> 10¢ fee                                                                       | <input type="checkbox"/> 35¢ fee               | <input type="checkbox"/> 50¢ fee |
| POD Form 3800 Mar. 1966 NO INSURANCE COVERAGE PROVIDED—<br>NOT FOR INTERNATIONAL MAIL (See other side) |                                                |                                  |



OFFICE PHONE 684-8861  
RESIDENCE PHONE 684-6818

**JOHN H. HENDRIX**

OIL PRODUCER

403 WALL TOWERS WEST

MIDLAND, TEXAS 79701

**RECEIPT FOR CERTIFIED MAIL—30¢**

|                                                                                                        |                                                                                    |                                                                  |
|--------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|------------------------------------------------------------------|
| SENT TO<br>GULF OIL CORPORATION                                                                        |                                                                                    | POSTMARK<br>OR DATE<br>                                          |
| STREET AND NO.<br>P. O. Box 1150                                                                       |                                                                                    |                                                                  |
| P. O., STATE, AND ZIP CODE<br>Midland, TX 79701                                                        |                                                                                    |                                                                  |
| EXTRA SERVICES FOR ADDITIONAL FEES                                                                     |                                                                                    |                                                                  |
| Return Receipt<br>Shows to whom<br>and date<br>delivered<br><input type="checkbox"/> 10¢ fee           | Shows to whom,<br>date, and where<br>delivered<br><input type="checkbox"/> 35¢ fee | Deliver to<br>Addressee Only<br><input type="checkbox"/> 50¢ fee |
| POD Form 3800 Mar. 1966 NO INSURANCE COVERAGE PROVIDED— (See other side)<br>NOT FOR INTERNATIONAL MAIL |                                                                                    |                                                                  |

No. 989432

**RECEIPT FOR CERTIFIED MAIL—30¢**

|                                                                                                        |                                                                                    |                                                                  |
|--------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|------------------------------------------------------------------|
| SENT TO<br>TEXAS PACIFIC OIL COMPANY                                                                   |                                                                                    | POSTMARK<br>OR DATE<br>                                          |
| STREET AND NO.<br>P. O. Box 4067                                                                       |                                                                                    |                                                                  |
| P. O., STATE, AND ZIP CODE<br>Midland, TX 79701                                                        |                                                                                    |                                                                  |
| EXTRA SERVICES FOR ADDITIONAL FEES                                                                     |                                                                                    |                                                                  |
| Return Receipt<br>Shows to whom<br>and date<br>delivered<br><input type="checkbox"/> 10¢ fee           | Shows to whom,<br>date, and where<br>delivered<br><input type="checkbox"/> 35¢ fee | Deliver to<br>Addressee Only<br><input type="checkbox"/> 50¢ fee |
| POD Form 3800 Mar. 1966 NO INSURANCE COVERAGE PROVIDED— (See other side)<br>NOT FOR INTERNATIONAL MAIL |                                                                                    |                                                                  |

No. 989433

**RECEIPT FOR CERTIFIED MAIL—30¢**

|                                                                                                        |                                                                                    |                                                                  |
|--------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|------------------------------------------------------------------|
| SENT TO<br>HANSON OIL CORPORATION                                                                      |                                                                                    | POSTMARK<br>OR DATE<br>                                          |
| STREET AND NO.<br>Petroleum Building                                                                   |                                                                                    |                                                                  |
| P. O., STATE, AND ZIP CODE<br>Roswell, NM 88201                                                        |                                                                                    |                                                                  |
| EXTRA SERVICES FOR ADDITIONAL FEES                                                                     |                                                                                    |                                                                  |
| Return Receipt<br>Shows to whom<br>and date<br>delivered<br><input type="checkbox"/> 10¢ fee           | Shows to whom,<br>date, and where<br>delivered<br><input type="checkbox"/> 35¢ fee | Deliver to<br>Addressee Only<br><input type="checkbox"/> 50¢ fee |
| POD Form 3800 Mar. 1966 NO INSURANCE COVERAGE PROVIDED— (See other side)<br>NOT FOR INTERNATIONAL MAIL |                                                                                    |                                                                  |

No. 989430