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PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Superseded Oil - 101 and 102  
Effective 1-1-65

I. Operator  
John H. Hendrix Corporation  
525 Midland Tower, Midland, Texas 79701  
Reason(s) for filing (check proper box)  
New Well ☐ Change in Transporter of:  
Existing Well ☐ Oil ☐ Dry Gas ☐  
Change in Conditions ☒ Casinghead Gas ☐ Condensate ☐  
Effective 1/1/77  
If this production is commingled with that from any other lease or pool, give commingling order number: John H. Hendrix, 525 Midland Tower, Midland, Texas 79701

II. LEASE INFORMATION  
Lease Name: Cossatot I Well No.: 1 Pool Name, Including Formation: Wantz Granite Wash Kind of Lease: State, Federal or Fee Fee:  
Location:  
Unit Letter: D 990 Feet From The North Line and 330 Feet From The West  
Line of Section: 13 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 ☐  
The Permian Corporation Permian (Eff. 9/1/87) Address (Give address to which approved copy of this form is to be sent): P. O. Box 1183, Houston, Texas 77001  
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐  
Skelly Oil Company Address (Give address to which approved copy of this form is to be sent): P. O. Box 1650, Tulsa, Oklahoma 74101  
If well produces oil or liquids, give location of tanks: Unit: Sec.: Twp.: Rge.: Is gas actually connected? When:  
EFFECTIVE JANUARY 31, 1977,  
SKELLY OIL COMPANY MERGED  
INTO GETTY OIL COMPANY.

IV. COMPLETION DATA  
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Some Restoration Diff. P.  
Date Spudded: Date Compl. Ready to Prod.: Total Depth: P.B.T.D.:  
Elevations (DF, RAB, RT, GR, etc.): Name of Producing Formation: Top Oil/Gas Pay: Tubing Depth:  
Perforations: Depth Casing Shoe:  
TUBING, CASING, AND CEMENTING RECORD  
POLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT

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 Tanks: Date of Test: Producing Method (Flow, pump, gas lift, etc.):  
Length of Test: Tubing Pressure: Casing Pressure: Choke Size:  
Actual Prod. During Test: Oil - Bbls.: Water - Bbls.: Gas - MCF

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:

I. 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.  
Signature: [Signature]  
Production Clerk  
January 18, 1977  
(Title)  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED: [Signature] 19  
BY: Jerry Sexton  
Dist. 1, Supv.  
TITLE:  
This form is to be filed in compliance with RULE 1103.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the production tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowables 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.