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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104

Supersedes Old C-104 and C-110  
Effective 1-1-65

I.

Operator	
John H. Hendrix	
Address	
403 Wall Towers West, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name  
and address of previous ownerTHIS WELL HAS BEEN PLACED IN THE POOL  
DEVELOPMENT CATEGORY. IF YOU DO NOT COMPLY  
WITH THIS CATEGORY.

## II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Cossatot "F"	3	Wantz Granite Wash R-4635	State, Federal or Fee	Fee
Location				
Unit Letter	D	790	Feet From The	West
Line and	965	Feet From The	North	
Line of Section	23	Township	22-S	Range
			37-E	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"/>	Address (Give address to which approved copy of this form is to be sent)	
The Permian Corporation	P. O. Box 1103, Houston, Texas 77001	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Warren Petroleum Company	P. O. Box 1589, Tulsa, Oklahoma 74101	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	C	23
		Twp.
		22-S
		Rge.
		37-E
Is gas actually connected?	When	
Yes	Unknown	

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.
	X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
7/23/73	9/4/73		7267'		7257'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3315' GL	Granite Wash		7106'		7230'			
Perforations					Depth Casing Shoe			
7106-7240'								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8 5/8"		1142'		450			
7 7/8"	5 1/2"		7267'		760			
	2 3/8"		7230'					

## 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.)	
9-3-73	9-4-73	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24	85#	Packer	28/64"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
45	45	0	310

## 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. 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.Marloree D Jones  
(Signature)

Production Clerk

(Title)

September 17, 1973

(Date)

## OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_

BY \_\_\_\_\_

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.All sections of this form must be filled out completely for allow-  
able 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

79701

New Mexico Oil & Gas Commission  
P. O. Box 1980  
Hobbs, New Mexico 88240

Gentlemen:

We submit the following deviation surveys for your information:

Field Name Drinkard County Lea State New Mexico  
Operator John H. Hendrix Address Wall Towers West  
4th Floor- City Midland, Texas  
Lease Name Cossatot "F" Well No. 3 Section 23 Block \_\_\_\_\_  
Township 22-S Range 37-E

[illegible]

Survey was run in drill pipe.

Certification of Personal Knowledge Inclination Data:

I hereby certify that I have personal knowledge of the data and facts on this form and that such information given above is true and complete.

C. M. Anderson, Manager

ROBINSON BROS. DRILLING CO.

Sworn and Subscribed to me this the 10th day of August 19 73.

My Commission expires 6-1-75

P. B. Zellmer  
P. B. Zellmer, Notary in and for  
Midland County, Texas