

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format CB-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator John H. Hendrix Corporation	
Address 525 Midland Tower, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	Other (please explain)
<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> New Well  <input type="checkbox"/> Recompletion  <input type="checkbox"/> Change in Ownership         </div> <div>           Change in Transporter of:  <input checked="" type="checkbox"/> Oil  <input type="checkbox"/> Casinghead Gas         </div> <div> <input type="checkbox"/> Dry Gas  <input type="checkbox"/> Condensate         </div> </div>	

If change of ownership give name  
and address of previous owner \_\_\_\_\_

## VI. DESCRIPTION OF WELL AND LEASE

Lease Name Cossatot M	Well No. 2	Pool Name, including Formation Wantz Granite Wash	Kind of Lease State, Federal or Free	Fee	Lease No.
Location					
Unit Letter M	: 1110	Feet From The West	Line and 1120	Feet From The South	
Line of Section 11	Township 22-S	Range 37-E	, N.M.P.M.		County Lea

### 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)			
Shell Pipeline Corporation		P.O. Box 2648, Houston, Texas 77002			
Name of Authorized Transporter of Gasinead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
Getty Oil Company		P.O. Box 3000, Tulsa, Oklahoma 74102			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Reg.	Is gas actually connected? When
	L	11	22	37	

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

NOTE: Complete Parts IV and V on reverse side if necessary.

## 7. CERTIFICATE OF COMPLIANCE

hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Charles Hunt  
(Signature)  
Production Clerk  
(Title)  
12-12-84  
(Date)

OIL CONSERVATION DIVISION

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 allowable 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 completed wells.