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| SANTA FE | |
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| U.S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | OIL |
| | GAS |
| OPERATOR | |
| PRODUCTION OFFICE | |

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
John H. Hendrix Corp
Address
223 W. Wall, Suite 525, Midland, TX. 79701
Reason(s) for filing (Check proper box)
☐ New Well
☐ Recompletion
☒ Change in Ownership
Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
Other (Please explain)

If change of ownership give name and address of previous owner
Exxon Company, U.S.A.

II. DESCRIPTION OF WELL AND LEASE
Lease Name
Whitaker & Perkins
Well No.
2
Pool Name, including
Drinkard, Granite Wash
Kind of Lease
State, Federal or Fee Fee
Lease No.
Location
Unit Letter C : 760 Feet From The North Line and 1780 Feet From The West
Line of Section 12 Township 22S 22 Range 37E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil or Condensate
Permian Corporation SCURLOCK PERMIAN CORP EFF 9-1-91
Address (Give address to which approved copy of this form is to be sent)
P.O. Box 1183, Houston, Tx. 77251
Name of Authorized Transporter of Casinghead Gas or Dry Gas
Texaco Prod. Inc.
Address (Give address to which approved copy of this form is to be sent)
1111 Rusk Avenue, Houston, Tx. 77052
If well produces oil or liquids, give location of tanks.
Unit C Sec. 12 Twp. 22 Rge. 37
Is gas actually connected? Yes When

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.

VI. 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 is true and complete to the best of my knowledge and belief.

Ronnie H. Westbrook
(Signature)
Vice-President
(Title)
July 1, 1988
(Date)

OIL CONSERVATION DIVISION
APPROVED
BY
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR
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.