

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

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

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
John H. Hendrix Corporation  
Address  
525 Midland Tower, Midland, Texas 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 Sun Exploration & Production Co., P.O. Box 1861, Midland, Tx 79702

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Langlie "B"</u>	Well No. <u>2</u>	Pool Name, including Formation <u>Justis-Blinberry</u>	Kind of Lease <u>State, Federal or Fee Federal</u>	Lease No. <u>NM4255</u>
Location Unit Letter <u>H</u> : <u>2310</u> Feet From The <u>North</u> Line and <u>990</u> Feet From The <u>East</u> Line of Section <u>11</u> Township <u>25-S</u> Range <u>37-E</u> N.M.P.M. Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS


Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> <u>Texas-New Mexico Pipeline Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1510, Midland, Texas 79701</u>					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>El Paso Natural Gas Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1492, El Paso, Texas 79910</u>					
If well produces oil or liquids, give location of tanks.	Unit <u>G</u>	Sec. <u>11</u>	Twp. <u>25</u>	Rge. <u>37</u>	Is gas actually connected? <u>Yes</u>	When <u>7-24-64</u>

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.

  
(Signature)  
Production Clerk  
(Title)  
February 6, 1986  
(Date)

OIL CONSERVATION DIVISION

APPROVED FEB 10 1986, 19  
BY ORIGINATOR SIGNATURE  
TITLE DISTRICT SUPERVISOR

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.