

Form C-102
DUPLICATE

OIL CONSERVATION COMMISSION

SANTA FE, NEW MEXICO

RECEIVED

Miscellaneous Reports on Wells

MAY - 2 1951

OIL CONSERVATION COMMISSION
HOBBBS OFFICE

Submit this report in triplicate to the Oil Conservation Commission or its proper agent within ten days after the work specified is completed. It should be signed and sworn to before a notary public for reports on beginning drilling operations, results of shooting well, results of test of casing shut off, result of plugging of well, and other important operations, even though the work was witnessed by an agent of the Commission. Reports on minor operations need not be signed and sworn to before a notary public. See additional instructions in the Rules and Regulations of the Commission.

Indicate nature of report by checking below.

REPORT ON BEGINNING DRILLING OPERATIONS		REPORT ON REPAIRING WELL	
REPORT ON RESULT OF SHOOTING OR CHEMICAL TREATMENT OF WELL		REPORT ON PULLING OR OTHERWISE ALTERING CASING	
REPORT ON RESULT OF TEST OF CASING SHUT-OFF		REPORT ON DEEPENING WELL	
REPORT ON RESULT OF PLUGGING OF WELL		Report on shut-in Pressures on Gas Wells	X

April 30, 1951, Date

Midland, Texas Place

OIL CONSERVATION COMMISSION,
SANTA FE, NEW MEXICO.
Gentlemen:

Following is a report on the work done and the results obtained under the heading noted above at the

The Texas Company--C. C. Fristoe NCT-4 Well No. 2-B in the

SW/4 SW/4 of Sec. 31, T. 24-S, R. 37-E, N. M. P. M.,
Langlie-Mattix Field Lea County.

The dates of this work were as follows: 4/22/51

Notice of intention to do the work ~~was~~ (was not) submitted on Form C-102 on _____ 19____

and approval of the proposed plan ~~was~~ (was not) obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

Shut-in pressure at the end of 24 hours--954. psia.

Witnessed by L. I. Baker, The Texas Company, District Gas Man
Name Company Title

Subscribed and sworn before me this _____

30th day of April, 19 51

Edith G. Echols
Edith G. Echols Notary Public

I hereby swear or affirm that the information given above is true and correct.

Name [Signature]

Position District Superintendent

Representing The Texas Company
Company or Operator

Address Box 1270, Midland, Texas

My commission expires 6/1/51

Remarks:

APPROVED

Date MAY - 2 1951

[Signature]
Name
Oil & Gas Inspector
Title