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FILE
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 1-1-60

Name of Operator	
Goody Oil Company	
Address	
P. O. Box 244, Hobbs, New Mexico 88240	
Reasons for filing (check proper box)	Other (Please explain)
New Well	Change in Transport Method
Change in Operator	Change in Location
Change in Production	Change in Conditions

II. DESCRIPTION OF WELL AND LEASE

Lease Name	State "T"	3	Thront Gas	County, Section, or Fee	State	B-2330
Location	North	22	East	1630	West	
Line of Section	16	Range	30E	Lea		

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter	Address (Give address to which a copy of this form is to be sent)
NONE	
Name of Authorized Transporter	Address (Give address to which a copy of this form is to be sent)
El Paso Natural Gas Co.	Box 1324, Dal, New Mexico
It is hereby authorized to transport	Yes

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

IV. COMPLETION DATA

Designate Type of Completion	Flow Well	Flow Well	Wendover	Seepage	Other
Date Completed					
Electrical Log					
Perforation					

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Working Pressure	Casing Pressure
Actual Prod. During Test	Water-Bble.	Gas-MOP

GAS WELL

Actual Prod. Test-MOP/D	Gravity of Condensate
Testing Method (Flow, back on)	Working Pressure (Shut-in)
	Casing Pressure (Shut-in)
	Choke Size

VI. CERTIFICATE OF COMPLIANCE

OIL CONSERVATION COMMISSION

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.

APPROVED	19
BY	
TITLE	

Signature
ASST. COMMISSIONER
September 3, 1960

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 recompletions 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 conditions.
Separate Forms C-104 must be filed for each pool in multiply completed wells.