Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

I.									
Operator	1011	RANSPORT	OIL AND N	4 TUHAL C		API No.			
CROSS TIMBERS OF	PERATING COMPA					30-025-29048			
Address					·	<u> </u>		ν υ	
P. O. Box 50847 Reason(s) for Filing (Check proper by	, Midland, Tex	<u>(as 7971 (</u>							
New Well	•	In Transporter of:		ther (Please exp	Main)				
Recompletion		Dry Gas							
Change in Operator (2)	Casinghead Gas	Condennate []						
and address of previous operator	ross Timbers P	roduction	Company.	P. O. B	ox 5084	7. Midla	nd. Tex	as 7971	
IL DESCRIPTION OF WEI			,	B. W.				······································	
Lease Name		2. Pool Name, Inc	luding Formation	5/100		of Lease	1	eese Na	
CHRISTMAS 2 Nadine			Blinebry West Sum			Fee Fee			
Location	. 380	ĺ		K	0		-		
Unit Letter A	:300	_ Feet From The	North u	me and421	<u>. </u>	oot From The	<u>East</u>	Line	
Section 7 Tow	nahip 20S	Range 38E		ІМРМ,	Lea			County	
III DECICALITION OF TH	ANCROPER OF								
III. DESIGNATION OF TR. Name of Authorized Transporter of Or		OIL AND NAT	URAL GAS	m add ass to	Mah anama	4. 2.41			
Pride Pipeline Company			Address (Give address to which approved copy of this form is to be sent) P. O. Box 2436, Abilene, Texas 79604						
Texaco Producing Inc ExpL + Producing			Address (Give address to which any					uni)	
If well produces oil or liquids,	Unit Sec.	Prode strice	<u> </u>	30x 3000	<u>, Tulsa</u>	, Oklaho	ma 74	102	
rive location of tanks.	Unit Sec. 0 6	Twp. R ₁ 20S 38E	ge. Is gas actual Yes	ly connected?	When	17			
f this production is commingled with the	hat from any other lease of			ber:					
V. COMPLETION DATA									
Designate Type of Completion	on - (X) Oil We	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready t	lo Prod.	Total Depth	L	l	P.B.T.D.	L		
						F.B.1.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing F	ame of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
erforations				<u> </u>			Depth Casing Shoe		
						Deput Casto	g Shoe		
	TUBING	CASING AN	D CEMENTI	NO RECOR	D	<u> </u>			
HOLE SIZE	CASING 8 T	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
			· 						
						 			
TEST DATA AND DEOLU	FOT FOR ALL OW								
. TEST DATA AND REQUIDED WELL (Test must be after	r recovery of total volume		ne ha annal en en	N					
Date First New Oil Run To Tank	Date of Test	oy loos os and mu	Producing Me	thod (Flow, pu	mable for this ma, sas lift, ei	depth or be fi	or full 24 hour	<i>3.)</i>	
					7.0===,,,				
ength of Test	Tubing Pressure		Casing Pressu	re		Choke Size			
ctual Prod. During Test Oil - Bbls.			Water - Bbls			Gas- MCF			
GAS WELL				·					
ctual Prod. Test - MCF/D	Length of Test	Bbls. Conden	Bbla. Coodenmis/MMCP			Oravity of Condensate			
ng Method (pitot, back pr.) Tubing Pressure (Shui-in)		Casing Pressure (Shut-in)							
	(4)	· ,	Casing Fresh	re (Streetes)		Choke Size			
L OPERATOR CERTIFIC	CATE OF COMP	LIANCE				<u> </u>			
I hereby certify that the rules and regi	C	OIL CONSERVATION DIVISION							
Division have been complied with an is true and complete to the best of my									
		А	Date	Approved				· · · · · · · · · · · · · · · · · · ·	
Larry S	Marnal		n	Ori	g. Signed	b v .			
Larry B. McDonal	A PA	By Orig. Signed by Paul Kauts							
Printed Name		Title	This		Geologist	}			
6-1-91 Date		-8873	Title_						
s-mij	Telep	phone No.							

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.