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	DISTRIBUTION	NEW MEXICO OU	CONCERVATION COMMIS	
	CANTAEE			Form C-104 Supersedes Old C-104 and C-1
	FILE AND Effective 1-1-65			
	U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
	h 	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE *Langlie Mattix Pool, *Langli		
	IRANSPORTER OIL #100 Fristoe "D"NOT=2 #4 C.O. Fristoe "a"NOT=1 #10			O LLIBOOR "S" MOI - I HID
	OPERATOR C.C. Fristoe "B"NCT-2 #5 C.C. Fristoe "a"NCT-1 #11 C.C. Fristoe "b"NCT-2 #6			
I.	PRORATION OFFICE C.C. Fristoe "b"NCT-2 #8			
	Operator	MINIM CO. T	C.	C. Fristoe "b"NCT-2 #9
	8.4da	TEXACO Inc.	C.	C. Fristoe "b"NCT-2 #11
	P. O. Box 728 - Hobbs, New Mexico			
	Reason(s) for filing (Check proper box) Other (Please explain)			
	New Well Change in Transporter of: *Request verbal permission to Commingle			
	Recompletion Oil Dry Gas above, and show Gas Transporter.			
	Change in Ownership	Casinghead Gas Conde	nsate Effective Sept	ember 1, 1965
	If change of ownership give name			
	and address of previous owner			
II.	DESCRIPTION OF WELL AND		ame, Including Formation	Kind of Lease
	C.C. Fristoe "b" NCT		Justis Blinebry	State, Federal or Fee
	Location	O Fact	080	_ North
	Unit Letter G; 198	O Feet From The East Lin	ne and 1980 Feet From	The NOTULE
	Line of Section 35 , Tov	waship 24-S Range 3	7-E , NMPM,	Lea County
II.	DESIGNATION OF TRANSPORT	FER OF OIL AND NATURAL GA	Address (Give address to which appro	oved copy of this form is to be sent)
	** Texas-New Mexico Pip		P. O. Box 1510 - Midla	
	Name of Authorized Transporter of Cas	singhead Gas X or Dry Gas	Address (Give address to which appro	
	El Paso Natural Gas	Company	P. O. Box 1384 - Jal,	
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	nen
	give location of tanks.	A 35 24-S 37-E	<u> </u>	NOT AVAILABLE
	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,	give commingling order number:	APPLIED FOR
	Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.			
	Designate Type of Completion	on — (X)		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Parl	Name of Producing Formation	Too OH (Can Day	Tubles Dooth
	Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforations	ango from The Permisa Co	monstion	Depth Casing Shoe
	**Change from The Permian Corporation.			
	101 5 6175		D CEMENTING RECORD	0.000 05115115
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
V.	TEST DATA AND REQUEST FO			and must be equal to or exceed top allow-
i	OIL WELL Date First New Oil Run To Tanks	Date of Test	pth or be for full 24 hours) Producing Method (Flow, pump, gas l	ift. etc.)
	Date : not her on han to raise		reading Method (1 too, pump, goo	,,,, e.e.,,
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
			·	
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
1		L	1	<u> </u>
	GAS WELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
- }	Testing Method (pitot, back pr.)	Tubing Pressure	God D	
- 1	resting method (phot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
/1.	CERTIFICATE OF COMPLIANO	CE	- OIL CONSERVA	ATION 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.		BY Merey	
,				
	,		TITLE	
			(11)/6	
	KAT DEXX		This form is to be filed in compliance with RULE 1104.	
	E. H. Scott (Signal	ture)	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.	
	District Accountant	<i>-</i> /		
August 30, 1965			All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out Sections I, II, III, and VI only for changes of owner,	

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