•	ì			
DISTRIBUTION		-		
· SANTA FE		ONSERVATION COMMIS: 4	Form C-104 Supersedes Old C-104 and C-110	
FILE		AND E. D. C	Effective 1-1-65	
. U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL		
LAND. OF FICE		AUG 11 0 13 .M 'E		
TRANSPORTER				
OPERATOR				
I. Operator	TEXACO, IN	IC		
	DRAWER 728			
Adaress	HOBBS, NEW MEXI	CO 88240		
Reason(s) for filing (Check proper box		Other (Please explain)		
New Weil	Change in Transporter of:			
Recompletion	Oil Dry Gas Casinghead Gas Condens		ename.	
Change in Ownership				
. If change of ownership give name and address of previous owner				
•				
II. DESCRIPTION OF WELL AND	Vell No. Pool Nam	ne, Including Formation	Kind of Lease	
C. C. Fristoe "B" NCT	the second s	is Tubb-Drinkard	State, Federal or Fee	
Location	NUT-2 West	052	- North	
Unit Letter <u>C</u> ; <u>165</u>	0 Feet From The West Line	e and OJL Feet From		
Line of Section 35 , To	wnship 24-S Range	37-Е , ММРМ,	Lea County	
		e.		
III: DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	Address (Give address to which appr	oved copy of this form is to be sent)	
Texas-New Mexico Pipe	Line Company	P. 0. Box 1510 - Midl	and, Texas	
Name of Authorized Transporter of Ca		Address (Give address to which approved copy of this form is to be sent) P. O. Box 1384 - Jal, New Mexico		
El Paso Natural Gas Co	Unit Sec. Twp. Rge.		/hen	
If well produces oil or liquids, give location of tanks.	A 35 24-S 37-E	Yes	Not Available	
If this production is commingled wi	th that from any other lease or pool,	give commingling order number:	· · · · · · · · · · · · · · · · · · ·	
IV. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
Designate Type of Completi	on – (X)			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
. Pool				
Perforations			Depth Casing Shoe	
·	TUBING CASING AND	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	-			
V. TEST DATA AND REQUEST F	FOR ALLOWABLE (Test must be a chie for this de	fter recovery of total volume of load o opth or be for full 24 hours)	il and must be equal to or exceed top allow-	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
			Choke Size	
• ength of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbls.	Water + Bbls.	Gas - MCF	
4				
в ¹				
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls, Condensate/MMCF	Gravity of Condensate	
i esting Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
			ZATION COMMISSION	
VI. CERTIFICATE OF COMPLIANCE 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.		OIL CONSERVATION COMMISSION		
				B
		· · · · · · · · · · · · · · · · · · ·		TITLE
: Out for			in compliance with RULE 1104.	
· Attact		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened		
E H SCOTT (Signature)		well, this form must be accompanied by a tabliation of the deviation tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow- able on new and recompleted wells.		
DIST. ACCOUNTANT				
SEP 1: 1967 (Tule)				
	Date)	well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply		
۱.		Separate Forms C-104 ff completed wells.	tang an ting the second point of the	