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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
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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 1-1-65

I.

Operator TEXACO Inc.	
Address P.O. Box 728, Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name C.C. Friston 'B' NCT-2	Well No. 14	Pool Name, Including Formation Undesignated	Kind of Lease State, Federal or Fee	Lease No. LC-032592
Location Fed.				
Unit Letter B ; 660 Feet From The North Line and 2310 Feet From The East				
Line of Section 35 Township 24-S Range 37-E , NMFM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Texas-New Mexico Pipe Line Co.	P.O. Box 1510, Midland, Texas 79701			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas Co.	P.O. Box 1384, Jal, New Mexico			
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 35	Twp. 24S	Rge. 37E
			Is gas actually connected? Yes	When April 24, 1970

If this production is commingled with that from any other lease or pool, give commingling order number: **PLC-22**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded March 28, 1970	Date Compl. Ready to Prod. April 24, 1970	Total Depth 5800'	P.B.T.D. 5764'					
Elevations (DF, RKB, RT, GR, etc.) 3183' (DF)	Name of Producing Formation Blinbry	Top Oil/Gas Pay 5294'	Tubing Depth 5269'					
Perforations Perforated w/2 JSPI @5294, 5303, 07, 15, 37, 49, 78, 84, 88, 5514, 22, 31, 46, 98, 5681'.			Depth Casing Shoe 5800'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8-5/8"		974'		375			
7-7/8"	4-1/2"		5800'		520			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks April 24, 1970	Date of Test April 24, 1970	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 18 hrs.	Tubing Pressure 650	Casing Pressure -	Choke Size 21/64"
Actual Prod. During Test	Oil-Bbls. 118	Water-Bbls. 8	Gas-MCF 647

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.


(Signature)

Assistant District Superintendent

(Title)

April 24, 1970

(Date)

OIL CONSERVATION COMMISSION

APR 28 1970

APPROVED

BY

TITLE

SUPERVISOR DISTRICT

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 recompleted 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 condition.

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

OFFICE OF THE

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APR 27 1970

OIL CONSERVATION COMM.
HOBBBS, N. M.