



## Aztec Energy Corporation

1206 EAST 20TH STREET P.O. BOX 2637  
(505) 326-2288  
FARMINGTON, NEW MEXICO 87401

October 27, 1982

New Mexico Oil and Gas Commission  
1000 Rio Brazos Road  
Aztec, New Mexico 87410

Attention: Mr. Frank Chavez

Reference: Deviation Surveys  
Aztec Energy Corporation  
LuLu #2  
2140' FSL and 990' FWL  
Sec. 29, T. 23 N., R. 6 W.

Dear Sirs:

Please accept the following as certified deviation surveys for the above well.

280'	1/4°
1990'	1/4°
2915'	1°
5005'	1 1/2°
5775'	1 1/4°

Sincerely,

AZTEC ENERGY CORPORATION

Wayne R. Townsend  
President

Subscribed and sworn to before me this 27th day of  
October, 1982.

  
Notary Public

My Commission Expires: August 4, 1985



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TRANSPORTER	OIL
	GAS
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REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

AZTEC ENERGY CORPORATION  
Address  
P. O. Box 2637, Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

CASINGHEAD GAS TRANSPORTER DESIGNATED

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Lu Lu	Well No. 1	Pool Name, Including Formation LYGROOK GALLUP EXTENSION	Kind of Lease State, Federal or Fee FEDERAL	Lease No. NM 28741
Location				
Unit Letter D	790	Feet From The NORTH	Line and 950	Feet From The WEST
Line of Section 29	Township 23 NORTH	Range 6 WEST	, NMPM, SANDOVAL County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> THE PERMIAN CORPORATION	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1181, Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> AZTEC ENERGY CORPORATION	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2637, Farmington, N. M. 87499					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 29	Twp. 23N	Rge. 6W	Is gas actually connected? No	When

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

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

CERTIFICATE OF COMPLIANCE

hereby certify that the rules and regulations of the Oil Conservation  
Division have been complied with and that the information given  
above is true and complete to the best of my knowledge and belief.

Ronnie W. Allen  
Ronnie W. Allen (Signature)  
Geologist (Title)  
December 1, 1982 (Date)

OIL CONSERVATION DIVISION

APPROVED DEC 2 1982, 19  
BY Original Signed by FRANK T. CHAVEZ  
TITLE SUPERVISOR DISTRICT # 3

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 allow-  
able 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  
completed wells.

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REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

COPY

Operator AZTEC ENERGY CORPORATION	
Address 1206 E. 20th Street, Farmington, New Mexico 87401	
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) Gas Connection Add transporter	

If change of ownership give name  
and address of previous owner \_\_\_\_\_

DESCRIPTION OF WELL AND LEASE

Lease Name Lulu	Well No. #1	Pool Name, Including Formation Lybrook Gallup Extension	Kind of Lease State, Federal or Fee Federal	Lease No. NM 28741
Location Unit Letter D : 790 Feet From The North Line and 950 Feet From The West				
Line of Section 29 Township 23N Range 6W		, NMPM, Sandoval County		

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) PO Box 1181, Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Aztec Energy Corporation	Address (Give address to which approved copy of this form is to be sent) PO Box 2637, Farmington, New Mexico 87499
If well produces oil or liquids, give location of tanks.	Unit D Sec. 29 Twp. 23N Rge. 6W Is gas actually connected? Yes When Jan. 14, 1983

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.

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GAS WELL

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

OIL CON. DIV.  
DIST. 3

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Ronnie W. Allen  
(Signature)  
Geologist  
(Title)  
May 4, 1983  
(Date)

OIL CONSERVATION DIVISION

APPROVED \_\_\_\_\_  
BY Original Signed by FRANK J. CHAVEZ  
TITLE \_\_\_\_\_

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 completed wells.

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-1-78

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REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. **Operator**  
Noarko Resources, Inc.

**Address**  
1206 East 20th Street, Farmington, N. M. 87401

**Reason(s) for filing (Check proper box)**

New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input checked="" type="checkbox"/>	Casinghead Gas	<input checked="" type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

**Other (Please explain)**

If change of ownership give name and address of previous owner: Aztec Energy Corporation, 1206 East 20th Street, Farmington, N. M. 87401

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lu Lu	Well No. 1	Pool Name, Including Formation Lybrook Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. NM 2874
Location Unit Letter <u>D</u> ; <u>790</u> Feet From The <u>North</u> Line and <u>950</u> Feet From The <u>West</u> Line of Section <u>29</u> Township <u>23 North</u> Range <u>6 West</u> , NMPM, <u>Sandoval</u> 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1181, Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Noarko Resources, Inc.	Address (Give address to which approved copy of this form is to be sent) 1206 East 20th St., Farmington, N. M. 87401
If well produces oil or liquids, give location of tanks. Unit <u>D</u> Sec. <u>29</u> Twp. <u>23N</u> Rge. <u>6W</u>	Is gas actually connected? <u>Yes</u> When <u>1-14-83</u>

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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 all able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

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

I. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

NOARKO RESOURCES, INC.

Ronnie W. Allen  
Ronnie W. Allen (Signature)  
Geologist (Title)

November 30, 1983

(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 5 1983  
BY Frank J. Dwyer  
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.  
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