NO. OF COPIES RECEIVED		5	
DISTRIBUTION			
SANTA FE			
FILE		1	
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS	1	
OPERATOR		2	
PRORATION OFFICE			

1	NO. OF COPIES RECEIVED 5				
[DISTRIBUTION	NEW MEXICO OIL COM	NSERVATION COMMISSION	Form C-104	
	SANTA FE	REQUEST FO	OR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65	
- 1	FILE		AND		
ļ	u.s.g.s.	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GAS	5	
-	LAND OFFICE				
l	TRANSPORTER GAS (•	
- 1	OPERATOR 2				
1.	PRORATION OFFICE				
-	Operator	1 1			
		TAL OIL COMPA	NY		
	Address		10 001/-		
	1.0. Box 46	0 HOBBS, N.	Other (Please explain)		
	Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Freuse explain)		
	New Well Recompletion	Oil Dry Gas			
	Change in Ownership	Casinghead Gas Condens			
	Citatique in Gwinerenip				
	If change of ownership give name				
	and address of previous owner			0	
II.	DESCRIPTION OF WELL AND I	EASE	mation Kind of Lease	CONTRAC	
	Lease Name	Well No. Pool Name, Including For	/ State, Federal o	INDIAN LOGGE NO.	
	AXI APACHE IV	12 SLANCO M	J. J	/2/	
	Location	90 Feet From The NORTH Line	and 1850 Feet From The	WEST	
	Unit Letter;;;	Feet From The // OK /// Line	and Feet From The	.4	
	Line of Section / Tow	mship 2511 Range	4 W , NMPM, 152	O ARRISA County	
	Line of Section 10w	namp - to			
HI.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	S		
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approved	d copy of this form is to be sent)	
			Address (Give address to which approve	Language of abic form in to be part!	
	Name of Authorized Transporter of Cas			copy of this form is to be sem,	
	GAS COMPANY O		DALLAS, TEXAS Is gas actually conjected? When		
	If well produces oil or liquids,	Unit Sec. Twp. R.ge.	Is gus detadify conducted?		
	give location of tanks.	<u>i </u>			
		h that from any other lease or pool, g	tive commingling order number:		
IV.	COMPLETION DATA	(25)	11011 11011	Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completion	1 1	X ;		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth 6297'	P.B.T.D.	
	6.26-77	7-15-77		Tubing Depth	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation MESA VERDE	Top Oil/Gas Pay	6072'	
	GR 7383'			Depth Casing Shoe	
	6012'-	6084'		6297	
		TUBING, CASING, AND	CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	1214"	8 5/8 "	518	320	
	77/9"	5 12 "	6297'	705	
		2 7/8"	6072'		
		<u> </u>			
V	. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be afinable for this des	ter recovery of total volume of load oil ar oth or be for full 24 hours)	na must be equal to or exceed top allow	
	OIL WELL 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	
				Gas - MCF	
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gds - MCF	
			<u> </u>		
				and the second of the second	
	GAS WELL	Length of Test	Bbls. Condensate/MMCF	Gravity of Cendensate	
	Actual Prod. Teet-MCF/D 2344 CAOF	3 HRS.			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size 3/4	
	BP	1225	1230	0/4	
. ,.	. CERTIFICATE OF COMPLIAN		OIL CONSERVA	TION COMMISSION	
VI	LERIFICALE OF COMPLIAN	<u></u>		+ . -	
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED Signed	 	
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			Original Signed by		
	above is true and complete to th	e near or in who are all and nerver.		<u> </u>	
			TITLE		
	2 0 1		This form is to be filed in C	ompliance with RULE 1104.	

Moce AZTEC (5) - USGS-DURANGO (2)

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