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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

Address  
P. O. Drawer 570, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box) (Other (Please explain))

New Well ☐ Change in Transportation of: Oil ☐ Dry Gas ☐  
Recompletion ☐ Casinghead Gas ☐ Condensate ☐ NAME CHANGE  
Change in Ownership ☐

Change give name Aztec Oil & Gas Company, P. O. Drawer 570, Farmington, New Mexico 87401  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Arizona Jicarilla "B"	#7	South Blanco Pictured Cliffs	Jicarilla Contract	#151

Location

Unit Letter: E; 1780 Feet From The North Line and 130 Feet From The West

Line of Section 4 Township 26 North Range 5 West, NMPM, Rio Arriba County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Platinum	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Gas Company of New Mexico	First International Bldg., Dallas, Texas 75270

If well produces oil or liquids, give location of tanks.

Unit Sec. Twp. Rge.

Is gas actually connected? 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.
None Spudded								
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Test 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 (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)

OIL WELL

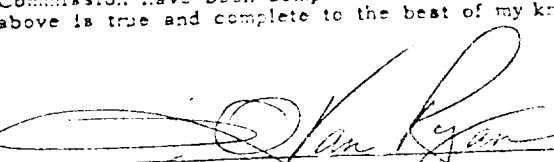
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Bbls.	Water-Gal.
		Choke Size
		Gas-MCF

GAS WELL

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

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)  
District Production Manager  
(Title)  
1-1-78  
(Date)

OIL CONSERVATION COMMISSION

APPROVED: JAN 12 1978, 19  
BY: Original Signed by A. R. Kendrick  
TITLE: District Production Manager

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