	DISTRIBUTIO	1		NEW MEXICO OIL CONSE	
l	SANTA FE		$\perp \perp$		REQUEST FOR
	FILE		\coprod		AN
ĺ	U.S.G.S.		<u>L_</u>		AUTHORIZATION TO TRANSPI
1	LAND OFFICE	l			
Ì	TRANSPORTER	OIL			
	INANSPORTER	GAS	1.L		
l	OPERATOR		Π		
	PRORATION OF	FICE			
	AAA Operat				Dallas, Texas 75206
	Reason(s) for filing New We!! Recompletion Change in Ownershi		proper	· box)	Change in Transporter of: Oil Dry Gas Casinghead Gas Condensate
		vious o	wner .		Wynn Oil Company, Inc.
	If change of owners and address of president DESCRIPTION College Name	vious o	wner .		LEASE Well No. Pool Name, Including Formati
	and address of pre-	or of WEI	wner .		FASE

4-13-79

(Date)

ERVATION COMMISSION

Form C-104

	SANTA FE	$\perp \perp \mid$		REQUEST F	OR ALLOWABL	E	Supersedes (Effective 1-1)ld C-104 and C-110 -65						
	FILE	\perp	\dashv											
-	U.S.G.S.			AUTHORIZATION TO TRAN	ISPORT OIL AN	D NATURAL G	A5							
-	LAND OFFICE OIL													
	TRANSPORTER GAS	7												
-	OPERATOR	-												
.	PRORATION OFFICE	-												
4.	Operator			The										
	AAA Operating Co			, inc.										
	Address 1808 Campbell Centre: Dallas, Texas 75206													
-		Reason(s) for filing (Check proper box) Other (Please explain)												
	New We!1	rope.	,	Change in Transporter of:										
	Recompletion Oil Dry Gas													
	Change in Ownership Casinghead Gas Condensate													
	of the second second second	f change of ownership give name Wynn Oil Company, Inc. 1808 Campbell Centre Dallas, Texas 75206												
	it change of ownership give and address of previous ow	ner_		Wynn Oil Company, Inc.	1808_Cam	<u>ıpbell Cent</u> r	re Dallas, T	exas 75206						
	ESCRIPTION OF WELL AND LEASE Legislator Formation Kind of Legislator Legislato													
11.	Lease Name	<u>. L. 74)</u>	י ער	Well No. Pool Name, including to				Lease No.						
	Largo Federal			l Largo Chacra	Largo Chacra St			NM 019401						
	Location													
	Unit Letter M	. ;	85	50 Feet From The South Line	and 790	Feet From	The West							
		ирм, San Ju	an County	County										
	Line of Section 11		104	wnship 27N Range	8W , NA									
111.	DESIGNATION OF TRA	NSP	or7	TER OF OIL AND NATURAL GAS	\$		-deam of this form i	e to be cent!						
	Name of Authorized Transpo	rter o	f 011	or Condensate	Address (Give addre	ess to which approv	ved copy of this form i	s to be sent)						
				singhead Gas or Dry Gas XX	Address (Give address to which approved copy of this form is to be sent)									
	Name of Authorized Transpo El Paso No	rtero atuu	ral	Gas Co.	P.O. Box 990) Farming	con, NM 8740	n, NM 87401						
				Unit Sec. Twp. Age.	Is gas actually cont	nected? Who	en							
	If well produces oil or liquid give location of tanks.	18,												
	If this production is commi	ingle	d wit	th that from any other lease or pool,	give commingling o	rder number:								
IV.	COMPLETION DATA			Oil Well Gas Well	New Well Workov		Plug Back Same F	les'v. Diff. Res'v.						
	Designate Type of C	omp	letic		1	i !								
	Date Spudded			Date Compl. Ready to Prod.	Total Depth		P.B.T.D.							
							Tubing Depth							
	Elevations (DF, RKB, RT, C	GR, et	c. j	Name of Producing Formation	Top Oil/Gas Pay									
					<u> </u>	· · · · · · · · · · · · · · · · · · ·	Depth Casing Shoe							
	Perforations													
				TUBING, CASING, AND	CEMENTING REC	CORD								
	HOLE SIZE			CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT							
	TEST DATA AND REQ	TIES	TF	OR ALLOWABLE (Test must be at	fter recovery of total	volume of load oil	and must be equal to	or exceed top allow-						
٧.	OIL WELL			able for this de	pth or be for full 24 i	nours)								
	Date First New Oil Run To	Tank	5	Date of Test	Producing Method (i tow, pamp, gas ti	, , , , , , , , , , , , , , , , , , ,	ALL ALL STREET BANKS OF THE STREET ST						
				Tubing Pressure	Casing Pressure		Choke Seze							
	Length of Test			raping resemble	-		163111111111111111111111111111111111111							
	Actual Prod. During Test		Oil-Bbls.	Water - Bbls.		Gas MOFF 61919								
	Verligt Lind' Darming 1 apr.													
							1 ,700,	04.3						
	GAS WELL				Bbls. Condensate/	MMCF	Gravity of Condens	D (S).						
	Actual Prod. Test-MCF/D		Length of Test	Bailet Generalia		Gravity College of Col.								
	Testing Method (pitot, back	c pr. J		Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size							
	lesting Method (phot) 925													
3/T	CERTIFICATE OF CO	IAN	ICE	∥ 0	IL CONSERV	ATION COMMISS	ION							
VI.				APPROVED_	JUN	1 1 1979	, 19							
	I hereby certify that the	and	regulations of the Oil Conservation with and that the information given		riginal Sign	ned by A. R. E	endrick _							
	Commission have been of	iea o th	with and that the information given ne best of my knowledge and belief.	Original Signed by A. R. Kendrick										
				TITLE	SUPERVISOR DISTRICT # 3									
	\bigcap			This form	is to be filed in	compliance with R	ULE 1104.							
	WA	رر	•	11	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened to be a request for allowable for a newly drilled or deepened.									
		(Signature)					well, this form must be accompanied by a tabulation of the well in accordance with RULE 111.							
	Presiden	ıt			1 411	It sessions of this form must be filled out completely for sliows								
		(Title)					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.