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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	/
OPERATOR		
PRORATION OFFICE		

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

36-045-23462

I. Operator
AAA Operating Company, Inc.
Address
Suite 3545 First International Building, Dallas, Texas 75270
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)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal E	Well No. Pool Name, Including Formation 6 <i>Largo</i> Chacra	Kind of Lease State, Federal or Fee	Lease No. SF 078476
Location Unit Letter <u>K</u> ; <u>1890</u> Feet From The <u>FSL</u> Line and <u>1590</u> Feet From The <u>FWL</u> Line of Section <u>13</u> Township <u>27N</u> Range <u>8W</u> , NMPM, <u>San Juan</u> County			

III. 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)	
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)	
E1 Paso Natural Gas Company	P.O. Box 990 Farmington, NM 87401	
If well produces oil or liquids, give location of tanks.	Unit	Sec. Twp. Rge. Is gas actually connected? When
		No

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 Restv.	Diff. Restv.
		XX	XX					
Date Spudded 5-2-79	Date Compl. Ready to Prod. 3-3-80	Total Depth 4047'	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) GR 6570'	Name of Producing Formation Chacra	Top Oil/Gas Pay 3842	Tubing Depth 3867'					
Perforations 3842, 3844, 3846, 3864, 3865, 3868, 3869, 3870, 3872, 3999, 4002			Depth Casing Shoe 4046'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 3/4	8 5/8	244'	160 SX					
6 3/4	4 1/2	4046'	355 SX					
	1 1/2	3867'						

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	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
		MAR 18 1980	
		OIL CON. COM.	
		DIST. 3	

GAS WELL

Actual Prod. Test - MCF/D 1803	Length of Test 3 hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 1050	Casing Pressure (Shut-in) 1050	Choke Size 3/4 T & C

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.

Larry D. Brugh
(Signature)

Geologist

(Title)

3/15/80

(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 18 1980, 19
BY Original Signed by FRANK T. HAVEL
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 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.