NO. OF COMES HELD	CIVEO	1		
DISTRIBUTION				
SANTA FE				
FILE				
u.s.G.S.				
LAND OFFICE				
IRANSPORTER	OIL			
	GAS			
OPERATOR				
PRORATION OF				

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND ON TO TRANSPORT OIL AND NATIRAL GAS

Form C-104
Supersedes Old C-104 and C-11(
Effective 1-1-65

ļ	U.S.G.S.	AUTHORIZATION TO TRAN	ASPORT OIL AND I	NATURAL G	AS			
	LAND OFFICE							
	TRANSPORTER GAS							
	OPERATOR							
.	PROBATION OFFICE							
ı.	Operator							
	AAA Operating Co	AAA Operating Company, Inc.						
	Address	75070			(D) R	: A _		
	3545 InterFirst Two	Dallas, Texas 75270	S 75270 Other (Please explain)		OIL CON. DIV.			
	Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Freasi	explainy	70			
	New Well	Oil Dry Gas		•	· FE	B2.		
	Recompletion Change in Ownership	Casinghead Gas Condens	751		0// ~	1/984		
	Chairje in Ownership					OV V		
	If change of ownership give name				DI	STUV		
	and address of previous owner					3		
II.	DESCRIPTION OF WELL AND I	EASE. Well No. Pool Name, Including Fo	zwallon	Kind of Lease		Lease No.		
	Lease Name	Well No. Pool Name, including to		State, Federal		NM-05791		
Federal M 1-A Blanco Mesaverde State, rederal NM						<u> </u>		
	Location F 1500	North	and <u>1680</u>	Fact From T	na West			
	Unit Letter F : 1500	Feet From The NOrth Line	and	reetriom i	110 110 0			
	Line of Section 3 Tow	nship 27N Range 8W	, NMPA	San Juar	n	County		
	Ease of Coston							
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	S Address (Give address	to which games	red copy of this form	is to be sent)		
	Name of Authorized Transporter of Oil	or Condensate X	Address (Othe address			,		
	Plateau, Incorporate	inghead Gas or Dry Gas V	P. O. Box 489 Address (Give address	to which approx	eld New Mex yed copy of this form	is to be sent)		
	Name of Authorized Transporter of Cas.		P. O. Box 990					
	El Paso Natural Gas	Unit Sec. Twp. Ege.	Is gas actually connec			100 07 101		
	If well produces oil or liquids, cive location of tanks.		No	1				
	If this production is commingled with	h that from any other lease or pool.	give commingling orde	r number:				
W.	COMPLETION DATA				T Diva Back Same	Res'v. Diff. Res'v.		
		Oil Well Gas Well	Norkover	Deepen	Plug Back Same	Mes 1. Dill. Hes 11		
	Designate Type of Completio		Total Depth		P.B.T.D.			
	Date Spudded	Date Compl. Ready to Prod.						
	12/7/8	1/23/84 Name of Producing Formation	4850 Top Oil/Gas Pay		Tubing Depth			
	Elevations (DF, RKB, RT, GR, etc.) 5835 GR	Mesaverde	4365		4352			
	Perforations		1505		Depth Casing Sho	•		
	42/04-4470 302hots							
	7.30.7.77.10	TUBING, CASING, AND						
	HOLE SIZE	CASING & TUBING SIZE	DEPTHS	ET		CEMENT		
	12 1/4"	8 5/8	259					
	7 7/8"	4 1/2	4850 4352		925 43			
		2 3/8	4352		<u> </u>			
	DESCRIPTION OF THE PROPERTY OF	D ATTOWARTE (Test must be a	fter recovery of total voi	ume of load oil	and must be equal to	o or exceed top allow		
V.	OIL WELL	EST 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) IL WELL Producing Method (Flow, pump, gas lift, etc.)						
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flo	w, pump, gas li	jt, etc.)			
					Choke Size			
	Length of Test	Tubing Pressure	Casing Pressure					
		Oil-Bhis.	Water - Bbls.		Gas - MCF			
	Actual Prod. During Test							
	GAS WELL Gravity of Condensate							
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MM	CF	Cravity of Conde	дести		
	3034 Testing Method (pitot, back pr.)	3 hours Tubing Pressure (Shut-in)	Casing Pressure (Shu	t-12)	Choke Size			
		1025	1030	•	3/4_TC_			
	Back pressure		OII	CONSERVA	ATION COMMIS	SION		
VI	CERTIFICATE OF COMPLIAN	DE	2-23-84 APPROVED	CED	99 1004			
		APPROVED	FLD	23 1984	, 19			
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.			BY Original Signed by FRANK T. CHAVE?					
			13					
			TITLE					
	<i></i>	ر ا		This form is to be filed in compliance with RULE 1104.				
Vice President (Fulle) February 15, 1984			If this is a request for allowable for a newly drilled or deeper. well, this form must be accompanied by a tabulation of the deviation of the deviation of 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.		
			well name or num	Fill out only Sections I. II. and with change of condition well name or number, or transporter, or other such change of condition				
			li .					