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FILE 1 C
U.S.G.S.
LAND OFFICE
TRANSPORTER OIL 1
GAS 1
OPERATOR 1
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-116
Effective 1-1-65

I. Operator
Aztec Oil & Gas Company
Address
P. O. Drawer 570, Farmington, New Mexico
Reason(s) for filing (Check proper box) Other (Please explain)
New Well X * Change in Transporter of:
Recompletion Oil Dry Gas
Change in Ownership Casinghead Gas Condensate * Old well dually completed
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name: McClanahan
Well No.: 2
Pool Name, Including Formation: Blanco Mesaverde
Kind of Lease: State, Federal or Fee SF-079634
Lease No.:
Location
Unit Letter A ; 990 Feet From The North Line and 790 Feet From The East
Line of Section 13 Township 28 North Range 10 West, NMPM San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil or Condensate X
Address (Give address to which approved copy of this form is to be sent)
Plateau Box 108, Farmington, New Mexico
Name of Authorized Transporter of Casinghead Gas or Dry Gas X
Address (Give address to which approved copy of this form is to be sent)
Southern Union Gathering Box 808, Bloomfield, New Mexico
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:

IV. COMPLETION DATA
Designate Type of Completion – (X) Oil Well Gas Well X New Well Workover Deepen Plug Back Same Resv. Diff. Resv.
Date Spudded Date Compl. Ready to Prod. 2-19-72 Total Depth 6260 P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.) 5869 GR Name of Producing Formation Blanco Mesaverde Top Oil/Gas Pay 4202 Tubing Depth 4225
Perforations 4202-38, 4264-70, 4276-98, 4308-30 w/ 3 SPF Depth Casing Shoe

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12¼"	9⅝"	320'	
8¾"	7"	6260'	

V. 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 a 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

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OIL CON. COM.
DIST. 3

Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate
317 24 hrs
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size
Production Test

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.

(Signature)
District Superintendent
(Title)
March 7, 1972
(Date)

OIL CONSERVATION COMMISSION
APPROVED MAR 8 1972, 19
BY Original Signed by Emery C Arnold
TITLE SUPERVISOR DIST. #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, it must be accompanied by a tabulation of the deviation tests taken 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 operator, 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.