NO. OF COPIES RECEIVED	+-		
DISTRIBUTION		$\perp$	
SANTA FE			
FILE	L.		
U.S.G.S.		Ì	
LAND OFFICE			
TRANSPORTER OIL GAS	+-	1	
OPERATOR			
PRORAT CFFICE	$\Gamma$	$\Box$	
Operator Aztroc C. 1 & Gas	Сс	mp	oar
CO. Jeawer 570	ο,	Fa	ım
Recoon(s) for alling (Check	prop	er	box
New Wet.			
Recomples a			
Change whership			

	SANTA FE	REQUEST FOR ALLOWABLE					Form 0-104 Supersedes (Na 1104 and C-110		
	FILE	<u>,</u>	AND				: -104 and C-110		
	U.S.G.S.	AUTHODIZATIO	N TO TOA		OIL AND NATURAL GA	r			
	LAND OFFICE	AUTHURIZATIO	NIOIRA	NOPUK I	OIL AND NATURAL GA	.5			
	<del></del>	$\dashv$							
	TRANSPORTER OIL	<del>  </del>							
	GAS								
	OPERATOR								
1.	PRORAT TO SEFICE								
	Operator								
	Aztes C.i & Gas Compan	у							
	Adc. is				-				
	Co. Frawer 570, Farmington, New Mexico 87401								
Recoon(s) for taking (Check proper box)  Other (Please explain)									
	New Wein	Change in Transporter	r of:						
	Recomples a	OII	Dry Gas	XX					
	Change whership	Casinghead Gas	Conden		A Among 1 1 1	•			
	Change	Cashiqueda Gas []			<u> </u>				
	If change of ownership give name								
	and address of previous owner								
II.	DESCRIPTION OF WELL AND I	LEASE			1		<del></del>		
	Lease Name	Well No. Pool Name,	Including Fo	rmation	Kind of Lease		Lease No.		
	Carson	#1   Ba:	sin Dako	ta	State, Federal o	or Fee	NM-4453		
	Location								
	Unit Letter L; 15	40 Feet From The SOI	uth rine	a and	990 Feet From Th	- West			
	Unit Letter;;	10 Leef Lion The	<u> </u>		1 001 1 1011 111	·			
	Land Santon 1 Ton	mship 35 N	Range 5	West	, NMPM,	Rio Arriba	County		
	Line of Section I Tow	asinp JO75	ridige D	11030	, 141411 1415				
	THE STATE OF THE ANGROUS	TOD OF OH AND MAD	CUDAL CA	c					
Ш.	DESIGNATION OF TRANSPORT			Address (	Give address to which approve	d copy of this form is	to be sent!		
	i	or condensate g	<u>A</u>	· ·					
	Plateau, Inc.			Box	108, Farmington, N	lew Mexico			
	Name of Authorized Transporter of Cas	inghead Gas or Dry	Gas XX	!	Give address to which approve		3		
	Northwest Pipeline Corp	poration		501	Airport Drive, Far	mington, New	Mexico		
	If well produces oil or liquids,	Unit Sec. Twp.	P.ge.	Is gas act	ually connected? When				
	give location of tanks.	1 1	1		1				
		h that from any other les	Se or 5001	rive comm	ingling order number:				
**/	If this production is commingled with	n that from any other lea	ise or poor,	Sive comm	inging order number.	<del></del>	<del></del>		
IV.	COMPLETION DATA	Oil Well	Gas Well	New Well	Workover Deepen	Plug Back   Same Re	s'v. Diff. Res'v.		
	Designate Type of Completio	n = (X)	ł 2	1 1	i i	` ! 	- 1		
		Date Compl. Ready to Pro		Total Dep	<u></u>	P.B.T.D.	-		
	Date Spudded	Date Compl. Reday to Pro	a.	1 Old Dep	in a second	F.B.1.D.			
						<b>B</b> 11 <b>B</b> 21			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Forma	tion	Top Oil/C	as Pay	Tubing Depth			
				<u> </u>	THE STATE OF THE S				
	Perforations		Depth Casing Shoe						
				(RILLIYED)					
		TUBING, C	ASING, AND	CEMENT	ING RECORD				
	HOLE SIZE	CASING & TUBIN	G SIZE		DEPTH SET 9 1974	SACKS CE	MENT		
					JAN 2	1			
					OIL CON. COM.				
		<del>                                     </del>			OIL DIST 3	·			
		<del> </del>			Ole .	·			
		OR ATTOWARTE (TO		·	y of total volume of load oil ar	d -use he sevel to se	aveced top allows		
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (To	est must be aj Le for this de	iter recover oth or be fo	y of total volume of load oil ar or full 24 hours)	ta must be equal to or	exceed top ditou-		
	OIL WELL Date First New Oil Run To Tanks	Date of Test	70. 1.112 00		Method (Flow, pump, gas lift,	etc.)			
	Date First New Oil Hun To Tanks	Date of Lear		7.0000			}		
				C		Choke Size			
	Length of Test	Tubing Pressure		Casing P					
				ļ		0			
	Actual Prod. During Test	Oil-Bbls.		Water - Bb	15.	Gas - MCF			
	1								
	GAS WELL				·				
	Actual Prod. Test-MCF/D	Length of Test		Bbls. Co	ndensate/MMCF	Gravity of Condensat	•		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-	(a)	Casing P	ressure (Shut-in)	Choke Size			
	. Fatting Matrice (price) been pity								
		<u> </u>		<del> </del>					
VI	CERTIFICAT. OF COMPLIAN	CE			OIL CONSERVAT	TION COMMISSIO	N		
				FEB 7 1974					
	creby certify that the rules and	regulations of the Oil Co	ations of the Oil Conservation		OVED	12/4	, '9		
Correby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given			Contained Stemed by France C. Amald						
above is true and complete to the best of my knowledge and belief.				BY Original Signed by Emery C. Arnold					
				! ! TITLE	SUPERVISO	R DIST. #3			
				11					
	Jac C Salmon				nis form is to be filed in co				
				If.	this is a request for allows	able for a newly dri.	led or deepened		
(Signature)				I wall this form must be accompanied by a tabulation of the deviation					
	District Su	perin <b>tendent</b>	ntendent		tests taken on the well in accordance with RULE 111.  All sections of this form must be filled out completely for allow				
					ll sections of this form mus n new and recompleted wel	ls.	=110W-		
	January 29,			Ente o	ill out only Sections I. II.	III, and VI for chi	anges of owner.		
				Va DECIAVILE AI AAI	a as ather such ches	ge of condition.			

(Date)

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.