			/
DISTRIBUTION		CONCERNATION CONNECTION	Б
SANTA FE		CONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and
FILE /		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GA S
LAND OFFICE			
TRANSPORTER GAS /			
OPERATOR U			
PROBATION OFFICE			
Operator COLTRI AND T	NAME TO STANK		
Address SCOTTLAND :	COMPANY		
i	ington, New Mexico 8740	01	
Reason(s) is fling (Check proper box)	ington, non-nontre	Other (Please explain)	
New Well	Change in Transporter of:	-	
Recompletion	OII Dry Ga		NAME CHAMGE
Change in Ownership	Casinghead Gas Conder		
If change give name A and address of previous owner	ztec Oil & Gas Company,	P. O. Drawer 570, Farm	ington, New Mexico D
DESCRIPTION OF WELL AND I	LEASE Well No. Pool Name, Including F	formation Kind of Lea	:se
Lease Name		ictured Cliffs State, Fede	
Logation	π4 AZLEC P.	ICCUIOU CIIIIS	1000101 0770
	O Feet From The South Lir	ne and 1480 Feet From	The West
<u> </u>		r	<u>.</u>
Line of Section 31 Tow	waship 29 North Range	9 West , NMPM,	San Juan 👓
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which app	roved copy of this form is to be sent)
Name of Authorized Transporter of Cas	unched Gas or Dry Gra X	Address (Give address to which app	roved copy of this form is to be sent;
Southern Union Gather		Fidelity Union Tower	, Dallas, Texas 75201
	Unit Sec. Twp. Fige.	la gas antually converged?	(hen-
give location of tanks.	1		- 1
If this production is commingled wit	th that from any other lease or pool,	give commingling order number:	
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Dist.
Designate Type of Completic	on = (X)		1
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Name of Producing Formation	Tey Oil/Ges Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing remation	102,02,02310,	
Perforations			Depth Casing Shoe
	·	<u> </u>	*
	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TIMENO SHILE	D PARTY SET	SACRECEMENT
			<u> </u>
V. TEST DATA AND REQUEST F	OR ALLOWABLE (Test mist be	after recovery of total volume of load of lepth or be for full 24 hours)	oil and must be equal to or exceed to;
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Mathed (Flow, pump, gas	lift, etc.)
Date First New Oil Aun 10 lanks	Date 01 1001		
Length of Test	Tubing Pressure	Cosing Pressure	Chake Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gds-MCF
		1	
OAG WELV			
GAS WELL Actual Frod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size
		OH CONSED	VATION COMMISSION
I. CERTIFICATE OF COMPLIANCE			1 2 1978
I hazahu cartifu that the niles and	regulations of the Oil Conservation	1 APPROVED	<u>- ω 13/0</u> , 19
Commission have been complied	with and that the information giver he beat of my knowledge and belief.	l: OrioninolSio	gned by A. R. Kendrick
who we is time with combined to the	y		THE TOTAL PARTY AND

600 m (Signature) للزائد المعالج والأثا

> (Title) 1-1-73 (Date)

Districto

NSERVATION COMMISSION FOR ALLOWABLE AND

Form C-104 Supersedes Old C-104 and C-116 Effective 1-1-65

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Plug Back | Same Resty. Did. Resty.

and the second s	
Total Depth	P.B.T.D.
Tarioti (Can Day	Tubing Depth
Tep: Oll/Ges Pay	
	Depth Casing Shoe
CEMENTING RECORD	
	SACKS CENENT
I was also also the second and the	All the state of t
1	
pth or be for full 24 hours)	il and must be equal to or exceed top allow-
Producing Mathod (Flow, pump, gas	lift, etc.)
	A TOTAL SECTION
Cosing Pressure	Chake Street
The second of th	
Water - Bbis.	Gas-MCF
	and the second second
<u> </u>	
Bbis. Condensate/MMCF	Gravity of Condensate
Cosing Pressure (Shut-in)	Choke Size
• • • •	VATION COMMESSION
APPROVED	1 2 1978
Original Sig	gned by A. R. Kendrick
	PERVISOR DIST. #3-
TITLE SUI	PERVISOR DIST. II
This form is to be filed i	in compliance with RULE 1104.
trivity is a securat for all	invable for a newly drilled or deepened
well, this form must be accommendate taken on the well in ac-	noissived by a tabulation of the Gevietion
	must be filled out completely for allow-
Eill out only Sections T	, II, III, and VI for changes of owner, porter, or other such change of condition
Separate Forma C-104 m	nust be filed for each pool in multiply
completed wells.	