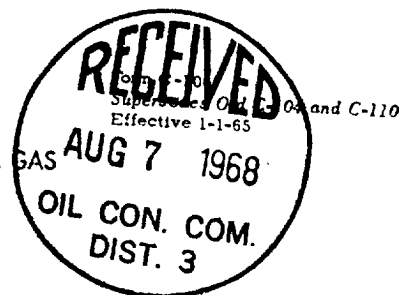


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TRANSPORTER	OIL	2
	GAS	2
OPERATOR		1
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS



I. Operator
Address Aztec Oil and Gas Company
Drawer 570, Farmington, New Mexico
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of: ☐ Gas Remarks: Gas used on Central Totah Unit as fuel
Recompletion ☐ Oil ☐ Dry Gas ☒ gas and sold to El Paso Natural Gas.
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Fagood</u>	Well No. <u>4</u>	Pool Name, including Formation <u>Leach Dakota</u>	Kind of Lease State, Federal or Fee	Lease No. <u>SF079065</u>
Location Unit Letter <u>D</u> ; <u>935</u> Feet From The <u>North</u> Line and <u>965</u> Feet From The <u>West</u> Line of Section <u>34</u> Township <u>20N</u> Range <u>13E</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ <u>606 Pipeline</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 123, Farmington, New Mexico</u>					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ <u>406 Four Corners Pipeline Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 123, Farmington, New Mexico</u>					
Name of Authorized Transporter of Gas <u>Aztec Oil and Gas & El Paso Natural Gas</u>	Address (Give address to which approved copy of this form is to be sent) <u>Drawer 570 & Box 990, Farmington, New Mexico</u>					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Range	Is gas actually connected? ☐	When <u>April 15, 1968</u>

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	Water Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Date Spudded	Date Compl. Ready to Prod.		Test Date			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after a series of total volume of load oil and must be equal to or exceed top allowable for this depth or deeper for 24 hours)

Date First New Oil Run To Tanks	Date of Test	Production Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Gravimetric Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	BSLW Condensate/MMCF	Gravity of Condensate
Testing Method (flow, back pr.)	Tubing Pressure (Start-End)	Gravimetric Pressure (Start-End)	Choke Size

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.

OIL CONSERVATION COMMISSION

APPROVED AUG 7, 1968
Original Signed by Emery C. Arnold
SUPERVISOR DIST. #3

Joe A. Williams
(Signature)

District Superintendent
(Title)

August 6, 1968
(Date)

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 from the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowables 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.
Form No. 2-104 must be filed for each well in multiple