ND. OF COPIES RECEIVED			
DISTRIBUTION			2
SANTA FE		1	
FILE		1	4
U.S.G.S.		'	
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR		4	
PRORATION OFFICE		<u> </u>	
Operator			

SANTA FE /	7 1	FOR ALLOWABLE	Supersedes Old C-104 and C-116
FILE /	4	AND Effective 1-1-65	
U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL	GAS
LAND OFFICE			•
TRANSPORTER GAS /	 		
OPERATOR 4	- 		
PRORATION OFFICE			
Operator			
<u> </u>	vaity to ray		
Address		01	
P. O. Drawer 5/U, Fa	armington, New Mexico 8740	Other (Please explain)	
New We'll	Change in Transporter of:		!
Recompletion	Oil Dry Gas	Name cha	nge,
Change in Ownership	Casinghead Gas Condens	sate	
If about a give nam	#	D O Drawar 570 Farm	mington New Mexico 3740!
If change give nam and address of previous owner	e Aztec Oil & Gas Company,	P. O. Diawei 370, Paris	Hington, New Hextes 57 /51
	IN 1 17 4 CF		•
DESCRIPTION OF WELL AN	Well No. Pool Name, Including Fo	ormation Kind of Lea	Lease No.
Walker	#2 Fulcher Kutz F	citured Cliff State, Fede	ral or Fee Fee
Location			
Unit Letter / D ;	990 Feet From The North Line	e and 990 Feet From	n The West
_			Can Tuan
Line of Section 3	Township 29 North Range I2	2 West , NMPM,	San Juan County
DECEMBER AND ASSESSED ASSESSED	ORTER OF OIL AND NATURAL GA	S	
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 the state			
Name of Authorized Transporter of	Casinghead Gas Cor Dry Gas X	1	roved copy of this form is to be sent)
Southern Union Gath	ering	Fidelity Union Tower	
If well produces oil or liquids,	Unit Sec. Twp. Ege.	Is gas actually connected?	Vhen
give location of tanks.			
If this production is commingled	with that from any other lease or pool,	give commingling order number:	
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Compl	etion - (X)		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
			Table Death
Elevations (DF, RKB, RT, GR, etc.	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
		<u> </u>	Depth Casing Shoe
Perforations			
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
		`	
		for a second value of land of	sil and must be equal to at exceed ton allow
	FOR ALLOWABLE (Test must be a able for this de	pers of be joi just 21 inches	
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow; pump; gas	lift, etc.)
		1	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
		Water-Bbis.	Gais-MCF
Actual Prod. During Test	Off-Bbls-	3.00	9
		L SON CON	1. 1
GAS WELL		A 28 3	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COMPL	IANCE	OIL CONSER	VATION COMMISSION
		APPROVED JAN	1 2 1978
Commission have been compli	and regulations of the Oil Conservation ed with and that the information given	Original Signed by A. R. Kendrick	
above is true and complete to	the best of my knowledge and belief.		
		TITLESU	PERVISOR DIST. #3
	\/		In compliance with RULE 1104.
	Man Koan	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deeper	
	(Signature)	well, this form must be accom- tests taken on the well in ac	manied by a tabulation of the deviation
District Produ	ction Manager	All sections of this form	must be filled out completely for allow
1-1-78	(Title)	able on new and recompleted	walls.
7-5-10	/Paral	Fill out only Sections I well name or number, or transc	, II, III, and VI for changes of owner porter, or other such change of condition
(Date)		well name or number, or transporter, or other such change of condition	

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.