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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
A.R.

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator	
Artec Oil and Gas Company	
Address	
Box 570, Farmington, New Mexico	
Reason(s) for filing (Check proper box)	
New Well	Change in Transporter of:
Recompletion	Oil
Change in Ownership	Casinghead Gas
	Dry Gas
	Condensate

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No. Pool Name, including Formation	Kind of Lease	Lease No.
Alston	1	State, Federal or Fee	82-078125
Location			
Unit Letter	990	Feet From The	Line and 1650
Feet From The		West	
Line of Section	33	Township	Range
NMPM		San Juan	
		County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approved copy of this form is to be sent)
Blanton Incorporated		Box 265, Farmington, New Mexico
Name of Authorized Transporter of Casinghead Gas	or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
Southern Union Gathering		Box 265, Bloomfield, New Mexico
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Two.	Reg.
	Is gas actually connected?	When
	YES	

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	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X		Y				
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
4-20-68	5-2-68	4774	4774					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
5776 DF	Mogavero	4620	4672					
Perforations	4620-50, 4664-80, 2 SPB					Depth Casing Shoe		
4772								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13-1/4"	10-3/4"	156'	100 sx					
9	5-1/2"	4707'	250 sx					
4-3/4"	3-1/2"	4260' to 4772'	35 sx					
	2-1/2"	4670'						

V. TEST DATA AND REQUEST FOR ALLOWABLE (This must be after recovery of total volume of load oil and must be equal to or exceed top allowable for the depth or for 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 - Ebbs.	Water - Ebbs.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Water Condensate/MCF	Gravity of Condensate
Flowing Pressure (Static, Best, etc.)	Flowing Pressure (Static, Best, etc.)	Casing Pressure (Static - In)	Choke Size

VI. SIGNATURES OF COMPLETION

OIL CONSERVATION COMMISSION

NOV 5 1968

APPROVED
Original Signed by Emery C. Arnold

SUPERVISOR DIST.

NOTE
This form is to be filled 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 route taken on the well 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 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

I hereby certify that the completion of the Oil and Gas Well has been completed and that the well is in compliance with the rules and regulations of the New Mexico Oil Conservation Commission.

Emery C. Arnold
(Signature)

District Superintendent
(Title)

November 1, 1968
(Date)