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DISTRIBUTIO	ЭN		
SANTA FE		1	
FILE		1	<u></u>
U.S.G.S.			
LAND OFFICE			
I RANSPORTER	OIL		
I KANSFORTER	GAS	1	
OPERATOR		1)	

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	DISTRIBUTION	NEW MEXICO OIL CO	ONSERVATION COMMISSION	Form C-104
	SANTA FE /	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65
	FILE / -		AND	
	U.S.G.S.	AUTHORIZATION TO TRA	INSPORT OIL AND NATUR	ME GAS
	OIL			
	TRANSPORTER GAS			
	OPERATOR 2			
I.	PRORATION OFFICE			
	Aztec Odl. & Gas Compa	ny		
	P. O. Draver 570. Far Reason(s) for filing (Check proper box	mington, New Mexico	Other (r. 1181 explain	
	New Well	Change in Transporter of:		
	Recompletion X Change in Ownership	Oil Dry Gas  Casinghead Gas Conden	<del></del>	
	onange in owneronip			
	If change of ownership give name and address of previous owner			
II.	DESCRIPTION OF WELL AND Lease Name	Lease No.   Well No.   Pool Nar	ne, Including Porration	Kind of Lease
	Davis	2 Blar	nco Mesaverde	State, Federal or Fee <b>Federal</b>
	Location		222	90n n.h.
	Unit Letter P; 99	O Feet From The <b>South</b> Lin	e and <b>990</b> Feet	From The <b>Past</b>
	Line of Section 11 To	wnship 31N Range	, NotPM,	San Juan County
III.	Name of Authorized Transporter of Officers	TER OF OIL AND NATURAL GA	S Address (Give address to which	approved copy of this form is to be sent)
	Name of Authorized Transporter of Ca	singhead Gas or Dry Gas	Address (Give address to which	approved copy of this form is to be sent)
	Southern Union Gather		D 0 Por 208 Plo	owffeld New Meyico
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	P. C. Box 398 Blo	· ·
	give location of tanks.		Yes	3/7/66
		th that from any other lease or pool,	give commingling order numbe	r:
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deep	pen Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Completi	on – (X)	•	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	2/26/66	3/7/66	5470 Top Oil/Gas Pay	Tubing Depth
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	ļ.	
	6367 GR Periorations	Mesaverde	5218	Depth Cosing Shoe
		8-88 0 shate new foot		5464
	5210=34, 5250=55, 525	8-88, 2 shots per foot TUBING, CASING, AND	CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	4-3/4"	3½" - wt. 6.9#	5464	190 sacks
		14" - wt. 2.75#	<b>52</b> 60	
v	TEST DATA AND REQUEST F	OR ALLOWARIE (Test must be a	fter recovery of total valume of lo	pad oil and must be with to on exceed top allow
٧.	OIL WELL	able for this de		oad oil and must be said to or exceed top allow
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump,	/ Vroci /
	Length of Test	Tubing Pressure	Casing Pressure	MAR 24 1966 ORE CON. COM.
	Actual Prod. During Test	Oil-Bbis.	Water-Bbis.	DIST. 3
	GAS WELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	2166			
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
	•	758	758	3/\n
VI.	CERTIFICATE OF COMPLIAN	ICE		ERVATION COMMISSION
	P. Completon of the state of the control of	regulations of the Oil Consequetion	APPROVED MAR 24	1966 , 19
	Commission have been complied	regulations of the Oil Conservation with and that the information given	Quidinal	Signed Emery C. Arnold
	above is true and complete to th	e best of my knowledge and belief.		
			TITLE Supervisor	Vist. # 3
			This form is to be fil	ed in compliance with RULE 1104.
	CRIGINAL SIGNED BY JO	E C. SALMON	If this is a request fo	r allowable for a newly drilled or despende

## VI.

Salmon	(Signature)	_	
District	t Superintend	lent	
	Distric	District Superintend	District Superintendent  March 22, 1966

well, this form must be accompanied by a tabulation of tests 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 completed wells.