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| DISTRIBUTION | | | |
| SANTA FE | | | |
| FILE | | 1 | 4 |
| U.S.G.S. | | | <u> </u> |
| LAND OFFICE | | | |
| IRANSPORTER | OIL | 1 | |
| | GAS | 1 | <u> </u> |
| OPERATOR | | 1 | <u> </u> |
| | | 1 | l . |

| DISTRIBUTION | NEW WEXTOO OIL CONTOURNE TO MANAGEMENT | | Form C-104 | |
|--|---|--|---|--|
| SANTA FE | REQUEST FOR ALLOWABLE Supersedes Old C-104 an Effective 1-1-65 | | | |
| FILE / U | | AND | | |
| U.S.G.S. | AUTHORIZATION TO TRANS | SPORT OIL AND NATURAL G | ias | |
| LAND OFFICE | | | | |
| IRANSPORTER GAS / | | | | |
| OPERATOR / | | | | |
| PRORATION OFFICE | | | | |
| Aztec Oil & Gas Compa | any | | | |
| Address P. O. Drawer 570, Fa | | | | |
| Reason(s) for filing (Check proper box) | | Other (Please explain) | | |
| New Well | Change in Transporter of: | | | |
| Recompletion X | Oil Dry Gas Casinghead Gas Condensa | | | |
| Change in Ownership | Casinghead Gas Condensa | | | |
| change of ownership give name nd address of previous owner | | | | |
| DESCRIPTION OF WELL AND I | LEASE | ngtion Kind of Leas | e Com Lease No | |
| Lease Name | Well No. Pool Name, including Fore | | COIII | |
| Mark Maddox | #1 Blanco Mesa | verde | red - ree | |
| | 50 Feet From The North Line | and 990 Feet From | The East | |
| | enship 32 North Range 11 | West , NMPM, | San Juan County | |
| DESIGNATION OF TRANSPORT | TER OF OIL AND NATURAL GAS | | () () () () () () () () () () | |
| Name of Authorized Transporter of Oil | or Condensate X | Address (Othe agrices to miter abb. | | |
| Plateau, Inc. | | P. O. Box 108, Farmi Address (Give address to which appro | ngton, New Mexico | |
| Name of Authorized Transporter of Car | | P. O. Box 990, Farmington, New Mexico | | |
| El Paso Natural Gas | | | hen | |
| If well produces oil or liquids, give location of tanks. | Unit Sec. Twp. Rge. | No | | |
| | ut at the same at least or pool of | | | |
| If this production is commingled wi | th that from any other lease or pool, g | | | |
| COMPLETION DATA | OII WOII | New Well Workover Deepen | Plug Back Same Res'v. Diff. Res | |
| Designate Type of Completi | 1 | 1 X | P.B.T.D. | |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | 5470' | |
| | 7-7-73 Name of Producing Formation | 5538 Top Oil/Gas Pay | Tubing Depth | |
| Elevations (DF, RKB, RT, GR, etc.) | Mesaverde | 5334' | 5373' | |
| 6343 GR | Mesaveruc | 3331 | Depth Casing Shoe | |
| 5334-5360, 5376-5430 |), 2 SPF | | | |
| | TUBING, CASING, AND | CEMENTING RECORD | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | |
| 614'' | 412'' | 5490' | 101 Sacks | |
| | 11/3" | 5373' | | |
| | | | | |
| DECLIES AND DECLIES A | COP AT LOWARIE. (Test must be at | ter recovery of total volume of load o | il and must be con on and top a | |
| TEST DATA AND REQUEST I | able for this de | pth or be for full 24 hours) | COLL FIVE | |
| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas | With such Little Land | |
| Length of Test | Tubing Pressure | Casing Pressure | Cok. SUL 2 5 1973 | |
| Actual Prod. During Test | Oil-Bbls. | Water - Bbis. | GOTE CON. COM. | |
| | | | DIST 3 | |
| GAS WELL | It would not Took | Bbls. Condensate/MMCF | Gravity of Condensate | |
| Actual Prod. Test-MCF/D | Length of Test | | | |
| 1479 | 3 Hours Tubing Pressure (shut-in) | Casing Pressure (Shut-in) | Choke Size | |
| Testing Method (pitot, back pr.) Back Pressure | 458 | 460 | 3/4" | |
| . CERTIFICATE OF COMPLIA | | OIL CONSER | VATION COMMISSION | |
| . CERTIFICATE OF COMPERA | | APPROVED JUL 25 1 | 973 | |
| . I hereby certify that the rules an | d regulations of the Oil Conservation | APPROVED | , 13 | |
| 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. | | By Original Signed by Emery C. Arnold | | |
| above is true and complete to | me near or mit whenteralle and account | TITLE SUPERVISOR DI | | |
| | | II. | | |
| | | This form is to be filed | in compliance with RULE 1104. | |
| On A Areanon | | TO ALL A DESCRIPTION S | llowable for a newly drilled or deep | |

District Superintendent (Title) July 23, 1973

(Signature)

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 numer, well name or number, or transporter or other such change of readition Separate Forms C-104 must be filed for sach pool to make

, we define the second of the

ANISA