	* /4	•	
. W COPIES REC	İ		
DISTRIBUTIO	5		
SANTA FE	1	V	
FILE	1		
u.s.g.s.			
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS		
OPERATOR	1		
PRORATION OF			

10

	SANTA FE / L	NEW MEXICO OIL	Form C-104 Supersedes Old C-104 and C-1 Effective 1-1-65				
	U.S.G.S.	AUTHORIZATION TO TR	AND AND	MATUDAL			
	LAND OFFICE	ACTIONIZATION TO TR	AND OF MAD	NATURAL	GAS		
•	TRANSPORTER OIL / GAS /		<u> </u>				
	OPERATOR /						
I.	PRORATION OFFICE						
	Operator						
	Aztec Oil and Gas	Company					
	Drawer 570 Far Reason(s) for filing (Check proper box	mington, New Mexico		·			
			Other (Pleas	e explain)			
	New Well	Change in Transporter of:	<u></u>		•		
	Recompletion	Oil Dry G	FF				
	Change in Ownership	Casinghead Gas Conde	ensate				
	If change of ownership give name and address of previous owner				CHANGE		
					OK .		
II.	DESCRIPTION OF WELL AND				.]		
	2	Well No. Pool Name, Including F	ormation	Kind of Leas		Lease No.	
	Grenier Location	15 Basin Dakot	<u> 2</u>	State, Federa	Fed_	SF 078115	
	Unit Letter F ; 147	O Feet From TheNorthLin	ne and <u>1690</u>	Feet From	The Past /	125t	
	Line of Section 18 To	wnship <b>21N</b> Range	IIW , NMPA	. San J	່ນຂກ	County	
III.		TER OF OIL AND NATURAL GA		· · ·			
	Name of Authorized Transporter of Oi	or Condensate	Address (Give address	to which appro	ved copy of this form is (	o be sent)	
	New Mexico Tankers to 'Name of Authorized Transporter of Ca	Plateau Inc. singhead Gas or Dry Gas 🛣	Box 2151 Address (Give address	Farmingt	on New Mexico	o be sent)	
	Southern Union Gather	ing	Box 398	RI comfie	ld, New Mexico		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connect	ed? Wh	en WEXICO		
	If this production is commingled wi	th that from any other lease or pool,	give commingling orde	r number:			
IV.	COMPLETION DATA	Oil Well Gas Well	1				
	Designate Type of Completic		New Well Workover	Deepen	Plug Back   Same Res	i'v. Diff. Resiv.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.		
	4/4/66	5/16/66 Name of Producing Formation	7300		7257		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top On Gas Pay	,	Tubing Bopth		
	6147 GR	Dakota	7133		7301		
	Perforations				Depth Casing Shoe		
	7133-37, 7143-52,	7212-46, 4 SPF			7390		
		TUBING, CASING, AND	D CEMENTING RECOR	D			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH \$	ET	SACKS CEN	IENT	
	12-1/4	8,45/8	266		225		
	7 <b>-</b> 7/8	4-1/2	7390		970		
ſ			1.07		. 710		
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volu	me of load oil	and must be equal to or e	xceed top allow-	
	OIL WELL	able for this de	epth or be for full 24 hours	)		· · · · · · · · · · · · · · · · · · ·	
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flou	, pump, gas li)	t, etc.)		
Ĺ							
	Length of Test	Tubing Pressure	Casing Pressure		STEPLINE.	<b>\</b>	
					VOLLLIAL		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.		Gas Marie I In the same	4	
					11 11 2 10CC		
					JUN 1 3 1966	1	
	GAS WELL				OH CON. CO	M./	
ſ	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	-	Gravity of Sedengate		
	3624	3 hr					
ſ	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut	-in)	Choke Srae		
	back pressure	1851	1851a		3/4**		
VI.	CERTIFICATE OF COMPLIANCE	CE	OIL C	ONSERVA	TION COMMISSION	J	

## VI. CERTIFICATE OF COMPLIANCE

District Superintendent (Tule)

June 10, 1966 (Date)

here	bу	certif	y the	at the	rules	and	regu!	latio	ns of	the	Oil	Conse	rvation
													ı given belief.

,	TITLE SUPERVISOR DIST. #3
) /	<u> </u>

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 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.