NO. OF COPIES REC	İ		
DISTRIBUTIO	6		
SANTA FE	7		
FILE	1	L	
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS	1	
OPERATOR	2		
PRORATION OF	S		
Operator			

	SANTA FE	19	1	NEW MEXICO OIL CONSERVATION COMMIS			Form C-104			
	FILE	11/	}	REQUES	ST FOR ALLOWAE	BLE	Supersedes Old C-104 and ( Effective 1-1-65	Supersedes Old C-104 and C-110 Effective 1-1-65		
	AND  U.S.G.S.  AUTHORIZATION TO TRANSPORT OIL AND NATU					AND MATURAL	0.1.3			
	LAND OFFICE	1-1-	AUI	HURIZATION 10 I	KANSPURT UIL A	AND NATURAL	GAS			
	OII	1								
	TRANSPORTER GAS	11	1							
	OPERATOR	2	1			•				
ı.	PRORATION OFFICE	19	1							
	Operator									
		Aztec Oil and Gas Company								
	Address									
	Drawer 570 Reason(s) for filing (Check)			ngton, New Mexico						
	New Well	proper oox)		a in Tegnanostor of	Other ()	Please explain)				
					Gas			1		
	Change in Ownership				densate densate			1		
				,						
	If change of ownership give and address of previous ownership									
	and address of previous ov	WIICI		· · · · · · · · · · · · · · · · · · ·						
II.	DESCRIPTION OF WELL AND LEASE									
			Well N			Kind of Leas	20000	٥.		
			16	Basin Dakot	8	State, Federa	Fed SF 078115			
	$\mathcal{Q}$	• •					-	l		
	Unit Letter	_ ii	50 Feet I	From The <b>South</b>	_ine and <u>1010</u>	Feet From	The East			
	Line of Section	Tow	mship 31	N Range	ייייייייייייייייייייייייייייייייייייייי	NMPM, Can	.Tuen Count	v		
	<u> </u>			14		<b>38</b> .0		ر		
III.	DESIGNATION OF TRA	NSPORT								
	Name of Authorized Transpor	rter of Oil	oi	Condensate	Address (Give add	dress to which appro	oved copy of this form is to be sent)			
	New Mexico Tanke 'Name of Authorized Transpor	rs to	Plateau	Inc	Box 2151	Farmingto	vel copy of this form is to be sent)			
	Name of Authorized Transpor	rter of Cas	inghead Gas	or Dry Gas	Address (Give add	dress to which appro	ved copy of this form is to be sent)			
	Southern Union G	atheri	ng Unit S	- Tr In	Box 398	Bloomfael	d, New Mexico			
	If well produces oil or liquid give location of tanks.	ls,	onit i	Sec. Twp. Rge.	is gas actually co	smected?   wi	err			
	3		<u> </u>	<u> </u>	no					
	If this production is commi COMPLETION DATA	ingled wit	h that from	any other lease or poo	ol, give commingling	order number:				
- • •		1	(3/)	Oil Well Gas Well	New Well Work	over Deepen	Plug Back   Same Restv. Diff. Res	s'v,		
	Designate Type of C	ompletio			_	 		İ		
	Date Spudded		Date Compl	. Ready to Prod.	Total Depth		P.B.T.D.			
	1/28/66 Elevations (DF, RKB, RT, G		5/9	26/66	Top Oli/Gas Pay		Tubing Dapt 3	_		
		R, etc.	Name of Pr	oducing Formation	Top Oll/Gas Pay		Tubing Deptito			
	Perforations		Dakot	t <del>a</del>	7600		Depth Chair Ence	-		
					•					
7600-7605, 7684-7699, 7711-7720BING			TUBING CASING A	NG. AND CEMENTING RECORD		<del>7828</del>	$\dashv$			
	HOLE SIZE		CASI	NG & TUBING SIZE	DEP	TH SET	SACKS CEMENT	$\neg$		
	12-1/4		8.	.ε <b>/</b> Ω	204		850			
	7-7/8 n		),	1/2	306 7828		<del>250</del> 850			
	1-1/0 1			1/0	7725		0,0			
			_		1127	<del></del>	<u> </u>			
V.		UEST FO	R ALLOW	VABLE (Test must be	after recovery of tota depth or be for full 24	l volume of load oil	and must be equal to or exceed top all	ow-		
	OIL WELL  Date First New Oil Run To T	Cank •	Date of Tea		<u> </u>	(Flow, pump, gas li	(t. etc.)			
	Date First New Oil Run 10 1	diks	Date of 1ee	•	Producting Method	(1 tow, panip, gas to	ZEL FIVEN			
	Length of Test		Tubing Pre	ssure	Casing Pressure		Choke Silk	$\dashv$		
	-	:					C 1066			
	Actual Prod. During Test		Oil-Bbls.		Water-Bbis.		Gas-MCF JUN 1 6 1966	П		
						CON. COM				
						DIST. 3				
	GAS WELL					A D 105	Gravity of Condensate			
	Actual Prod. Test-MCF/D		Length of T	rest	Bbls. Condensate,	/MMCF	Gravity of Condensate			
	Testing Method (pitot, back)	nr. J	Tubing Pre	Sant (Shut-In )	Casing Pressure (	Shut-in \	Choke Siza			
	realing (Mother (proof) book	<b></b> /		` ,		,				
VI	CEPTIFICATE OF CON	back wessure 2049 ERTIFICATE OF COMPLIANCE			2049	UL CONSERVA	TION COMMISSION			
V 1.	CENTIFICATE OF COM	ERTIFICATE OF COMPLIANCE			H					
	I hereby certify that the ru	hereby certify that the rules and regulations of the Oil Conservation			n APPROVED_	JUN 2	V 1966, 19			
	Commission have been co	Commission have been complied with and that the information given		n Origin	al Signed b	<sub>V</sub> Emery C. Arnold				
	above is true and complet	bove is true and complete to the best of my knowledge and belief.			11	By Original Signed by Emery C. Arnold				
	ODVODINE CYCERO NY TOT C CATAGON		TITLES	This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepened						
	CRIGINAL SIGNED BY JOE C. SALMON						This form			
							If this is			
	(Signature)			well, this form	must be accompa	nied by a tabulation of the deviat.	ion			
District Superintendent				tests taken on the well in accordance with RULE 111.  All sections of this form must be filled out completely for allow-						
	(Title)			able on new as	nd recompleted we	ells.				
	June 10.				Fill out o	nly Sections I, II	I, III, and VI for changes of own ten or other such change of conditi	er, on.		
(Date)			e)		1)		t be filed for each pool in multi			
						completed wells.				