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DISTRIBUTION	·	ONSERVATION COMMISSION	Form C-104 Supercedes Old C-104 and C-11
FILE	Effective 1-1-65		
U.S.G.S.	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL GAS	
TRANSPORTER GAS /			
PRORATION OFFICE			
Operator			
Address  P O Omawer 570	, Farmington, New Mexico	87401	
ecson(s) ver filling (Check proper bo		Other (Please explain)	
New Well Recompletion	Oil Dry Go	15	· ·
Change in Ownership	Casinghead Gas Conde		
change give name	Aztec Oil & Gas Company	P. O. Prawer 570, Farmingt	on, New Mexico 8740
ESCRIPTION OF WELL AND	) LF.AST.   Well No.   Pool Name, including F	Tormation Kind of Lease	Lease No.
Rattlesnake Canyon			es State
Control Contro	O Feet From The South Li	ne andFeet From The _	West
<b>~</b>	Township 32 North Ednage	8 West , NMPM,	San Juan County
	RTER OF OIL AND NATURAL G	AS	
Name of Authorized Transporter of C	or Condensate 🐧	Address (Give address to which approved a P. O. Box 108, Farmington	New Mexico 87401
Plateau, Inc.	Casinghead Gas or Dry Gas 📉	Address (Give address to which approved t	opy of this form is to be sent)
Northwest Pipeline	Corporation	P. O. Box 90, Farmington,	New Mexico 07401
If well produces oil or liquids, cive location of tanks.	Unit Sec. Twp. rice.		
f this production is commingled COMPLETION DATA	with that from any other lease or pool		no Book   Same Res'v. Diff. Res'
Designate Type of Comple	con = (X) Sil Well Gas Well	New Well Workswer Deepen F.	ug Book   Same Resty, Diff. Rest
Date Spudded	Date Compl. Ready to Prod.	Total Depth P.	5.T.D.
		and the second s	Management of the second of th
			-
			and the second s
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total valume of load oil and depth or be for full 24 hours;	must be equal to or exceed top allo
OU, WELL Pers First Few Oil Bun To Tenks	Consof Test	Freducino harbed Flow, punt, gas lift, a	re./
		Casing Pressure	hoke Size
est_quad Teat	ಡಬರಿಸುವು ನೀಡಕನಬಹೆ -	1	
Actual Prod. During Test	Cil-Brls.	Water-Eble.	A 8 1970
			COM.
GAS WELL			I a d
Lama Brod Test+MCF/D	Length of Test	Bala. Condensate /MMCF	iravity of Conference

## VI. CERTIFICATE OF COMPLIANCE

Testing Method (pitot, back pr.)

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V.

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.

(Signature)

District Production Manager

1-1-78

(Date)

Tubing Pressure (Shub-in)

OIL CONSERVATION COMMISSION

Choke Size

JAN 1 2 1978

Cosing Pressure (Stub-in)

Original Signed by A. R. Kendrick

SUPERVISOR DIST. 43 TITLE \_

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.

Separate Forms C-104 must be filed for each pool in multiply