AND ON CONTES A COCIVED 15			,
DISTRIBUTION 1			Form C-10:
ALE I			Supervedes Old C-15, r 1 1 1 Effective 1-1-55
			94S
0.0 1	*		
TRANSPORTEN GAS /			
CPENATOR /			
CONTROL CARROLL			
Aztec Oil & Gas Comp	ocay		
P. O. Drawer 570, Fo	ormington, New Mexico		
d record she (Chies (conscious)		Cistor (Plante expension)	
New Well Recompletion	Okange in Transport of the Day Ga		
One up in Ownership	Casinghead Gas [1] Conde		
li change of ownership give name	2		
una sadress of previous owner			
		Computer Kind of Leas	se Las
Lessa Name - Naoso Mosa	Well No. Pool Name, Including F	· · · · · · · · · · · · · · · · · ·	at or Fee NM-9037
Location			
Unit Letter	930 Feet From The Margick La	na and <u>000</u> Feet From	The East
Line of Cacalan 12 .	Township SAN Rect.	ari , amaw <u>.</u> San	Juan
n Mendin of Och Och fill (1859) Nama ef Automilia Transponer of	Oil Ondonuero	Acar is folios alaress so which appr	oved copy of this form is to be as a
Plateiu		12. 1 0an 111. Famin	gton, New Marico
Name of Mulhorized Transporter of	Oddinglicen dan er Dry 6	mantees (Gibe allrose so which appr	oved copy of this form is to be as a second
EPNG Co.	Onic Sec. Twp. Page.	Is gau astually connected? W	nen
If well procuded oil or liquids, give leading of tanks.			
	with that from Lay other luces or pool,	, give commingling ower number:	
<u> </u>	Oci Wali Oca Weli	New Wall Workover Deepen	Plug Back Same Resty, D
Designate Type of Comple			P.3.T.D.
Date baudeed	Dute Compl. Reday to Prod.	Mores Dopus	P.3.1.9.
Elevations (DF, RKB, RT, GR, esc	Name of Producing Formation	Top OL/Gas Pay	Tubing Depth
			Depth Casing Shoe
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and the second second	was a first three a		
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			DIST. 3
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	Tabley Product (Mino-us)	IREGNOC	Chobo Size /ATION COMMISSION
	Personal Community Lance of the Community and the community	C.L. CONCERN	Cholio Size VATION COMMISSION MAR 3 0 1972 , 15
	Massey Proced (Schooling)	Original Signed	Chobo Size VATION COMMISSION MAR 3 0 1972 by Emery C. Arnold
	inching Product (Sinchin) MICOLI MIC	Original Signed	Cholio Size VATION COMMISSION MAR 3 0 1972 , 10
	inching Product (Sinchin) MICOLI MIC	Original Signed	Choko Size VATION COMMISSION MAR 3 0 1972 by Emery C. Arnold PERVISOR DIST. #3 n compliance with ROLE 1164.
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	inches procedu (Simu-La) Lacott Laco	Original Signed SU	Choko Sizo VATION COMMISSION MAR 3 0 1972 by Emery C. Arnold PERVISOR DIST. #3 In compliance with Rule 1100. Compliance with Rule 1100. Compliance with Rule 1100.
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NO. OF COPIES RECEIVED		5	
DISTRIBUTION			
SANTA FE		1	
FILE		1	-
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL	1	
I KANSPORTER	GAS	1	
OPERATOR		/	
		i	1

III.

IV.

			v z.
NO. OF COPIES RECEIVED 5			
DISTRIBUTION		DNSERVATION COMMISSION	Form C-104
SANTA FE /	REQUEST I	FOR ALLOWABLE	Supersedes Old C-164 and C-110 Effective 1-1-65
FILE / C		AND	
U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL (3A5
LAND OFFICE			
TRANSPORTER OIL /			
GAS ,			
PRORATION OFFICE	:		
Operator			
Aztec Oil & Gas Compar	ıy (
Address P. O. Drawer 570, Farr	nington, New Mexico		
Reason(s) for filing (Check proper box,		Other (Please explain)	
New Well	Change in Transporter of:		i
Recompletion	Oil Dry Go	707	
Change in Ownership	Casinghead Gas Conder	nsdte A	
If change of ownership give name			
and address of previous owner			
DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, merading		·
Reese Mesa	1 Basin Dak	ota State, Feder	ral or Fee NM-9037
Location H 99	0 North	ne and 990 Feet From	The East
Unit Letter;;	Feet From TheLi		
Line of Section 12 To	wnship 32N Range	8W , _{NMPM} , San Ju	1an County
PROTON OF TRANSPOR	TER OF OIL AND NATURAL G	4S	
Name of Authorized Transporter of Ol	or Condensate	Varieza (otto megiant in minim -1)	roved copy of this form is to be sent)
Plateau	<u></u>	P. O. Box 108, Farmin	ngton, New Mexico
Name of Authorized Transporter of Co	singhead Gas 🔲 or Dry Gas 🔲	Address (Give address to which app	roved copy of this form is to be sent)
EPNG			71.
If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected?	Vhen
give location of tanks.			
If this production is commingled w	ith that from any other lease or pool	, give commingling order number:	
. COMPLETION DATA	Oil Well Gas Well	New Weil Workover Deepen	Plug Back Same Resty. D.M. Resty
Designate Type of Complet	ion - (X)		1
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Date opicator			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
			Depth Casing Shoe
Perforations	1		Depth Castq bilos
		THE PERSONS	
		ND CEMENTING RECORD	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	
	TOP STRONG TO THE	ofter recovery of total volume of load	oil and must be equal to or exceed top allo
. TEST DATA AND REQUEST	ROM HLLOWABLE (1 est must be able for this	depth or be for full 24 hours)	
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, ga	s lift, etc.)
			CELIVEN
Length of Test	Tubing Pressure	Casing Pressure	Lattilia ro /
			Gas-MCF
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	MAR 3 0 1972
			OIL CON. COM.
GAS WELL	I wash of Tags	Bbls. Condensate/MMCF	Greaty de Continuento
Actual Prod. Test-MCF/D	Length of Tost		
	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Testing Method (pitot, back pr.)	I don't Liesoma (omre-zm)		
		OIL CONSE	RVATION COMMISSION
A. CERTIFICATE OF COMPLIA	NCE		
	nd regulations of the Oil Conservati	on APPROVED	IAR 8 0 1972
t hereby certify that the rules as	id teditations of the Oir Comprisers	!!	

Vi

Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Dr. a Marine	
(Signature) District Superintendent	
(Title) March 29, 1972	

(Date)

BY Original Signed by Emery C. Arnold SUPERVISOR DIST. #3 TITLE _

This form is to be filed in compliance with RULE 1184.

If this is a request for allowable for a newly drilled or desponed well, this form must be accompanied by a tabulation of the deviction 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 change 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.