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NO. OF COPIES REC	15		
DISTRIBUTI			
SANTA FE	7		
FILE	1		
U.S.G.S.	-		
LAND OFFICE			
TRANSPORTER	OIL		
	GAS	7	
OPERATOR	2		
BROBATION CT	-		

-110

	DISTRIBUT	ION	ota			NEW	EYICO -							
	SANTA FE								Form C-104					
	FILE			7		REQUEST FOR ALLOWABLE					Supersedes Old C-104 and C.			
	U.S.G.S.				AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS							Ellective 1.1 ec		
	LAND OFFICE													
	IRANSPORTER	OIL												
		GAS	7											
	OPERATOR		2			,								
I.	PRORATION OF	FICE												
	Operator	<del></del>	LL		<del></del>				<del></del>					
	Astec 01.1	Aztec Oil & Gas Company												
	Address	Address												
	Drawer 570	E orace	. <b></b>	,	••									
	Drawer 570 Reason(s) for filing	(Check p	TLNG toper b	$\frac{zon}{\cos x}$	_New_Me:	xico								
	New Well	x	•	Change in Transporter of:  Other (Please explain)										
	Recompletion Oil													
ļ								Gas						
l		<u> </u>	Casinghead Gas Condensate											
:	If change of ownership give name													
4	and address of prev	ious ow	ner											
73	DESCRIPTION OF	<b>-</b>											<del></del>	
***	DESCRIPTION OF Lease Name	F WELI	J ANI	D LE	ASE	11	1							
	Crandell					POUNE	J. Eugno	Formation		Kind of Leas	e		Lease No.	
}	Location				6	<u>Pictur</u>	red Cli	ffs		State, Feder	al or Fee	Fee	Ledde No.	
	•									<del></del>		100		
	Unit Letter C	i		<u>990</u>	Feet From	m The $Nc$	orth 1	ine and	1790	Fact Bar	- <i>M</i>	_		
									2700	Feet From	The wes	<u></u>	·	
L	Line of Section	<u> 19</u>	Т	owns	1ip 31		Range	_10	, NMPM		~	_		
147 *	. Maran								7	<u>'</u>	San	n Juan	County	
111. [	DESIGNATION OF	TRAN	SPO	RTE	OF OIL	AND NAT	FURAL 6	AS						
	Name of Authorized T	ransporte	er of O	11	or Co	ondensate [		Address (	Give address t	o which appro	ved conv of	this form is a		
ļ.,	W							1		•••		into joint to te	oe sent)	
1	Name of Authorized T					or Dry (	Gcs 🔃	Address (	Give address t	o which appro-	ued come of	417- 7		
ļ_	Southern Uni	ion Go	the	rina	,			77: 3-7			ved copy of	this form is to	) be sent)	
	lf well produces oil or	liquids,		Un		Twp.	Rge.	Is gas get	ity Unior	1 Tower.	<u>Dallas</u>	Texas		
L	give location of tanks.	•		,	!	i	ı		and a dimestic	ur i wue	en .		•	
If	this production is COMPLETION DA	Commine	ded w	ith th	at from one			No		<u>i</u>				
ા". <u>c</u>	OMPLETION DA	TA.			at nom any	other leas	se or pool	, give comm	ingling order	number:				
:	Designate Type	-1.0	,		OI!	l Well	Gas Well	New Well	Workover	Deepen	TD: 5			
		- 01 C 0 n	тртетт	on	(A) ;			!	1	Doepen	Plug Back	: Same Res	v. Diff. Res'v.	
	ate Spudded			Det	e Compl. Re	ady to Pred	1.	Total Dept	h	<u>i</u>	5		1	
l 	7-30-69				<u>8-11-69</u>	a					P.B.T.D.			
E	levations (DF, RKB,	RT, $GR$ ,	etc.j	Nar	ne of Produc	ing Formati	lor.	Top Oil/G	96			90		
	5889 Gr			P	uctu	B31	000 M	<b>\</b>	614		Tubing De	pth		
F	erforations				سبب	عي ر	W	$\varphi \propto$	617		25	95		
L	2614-2586						V				Depth Cas	ing Shoe		
					TU	D. CENENE			26	90				
	HOLE SIZE CASING & TUBING SIZE							ND CEMENTING RECORD						
	$12\frac{1}{4}$			1	8 5/8		JILL	<del></del>	DEPTH SET	r	s	ACKS CEME	NT	
L	$6\frac{1}{4}$			1	41/2		<del></del>	-	112			60 sx		
					7				690			250 sx		
								J2	5.9.5					
V. T	EST DATA AND P	SECTIF	ST E	OP A	Y Y OW A DI			<del>-</del>		<u>_</u> i	<del></del>			
(2)	IL WELL			OK M	ALOWALDE	Test) للثان able	t must be a for this de	ifter recovery opth or be for	of total volume	of load oil a	nd must be a	equal to or exc	seed top allow-	
D	ate First New Oil Run	To Tank	. 9	Date	of Test		70 01100 (0)		sthod (Flow.					
				1					wattiod (Fibw. )	pump, gas lift,	etc.)			
L	ongth of Test			Tub	ing Pressure	<del></del>		Casing Pres						
								Caping Pies	18 11 6	j	Choke Size			
Ac	tual Prod. During Ter	st		011-	Bbls.			Water - Bbla	· · · · · · · · · · · · · · · · · · ·			Fi		
								ndret - Sp.a.	•		Gas - MCF	ZCI'LTI		
	· · · · · · · · · · · · · · · · · · ·	<del></del>		<u> </u>				<u> </u>				<u> </u>	$\wedge$ F $V \setminus V$	
	AS WELL										7	A PO PO PO		
Ac	ctual Prod. Test-MCF	/D		Leng	in of Test			Tau .				illa -		
	1694							Bols. Conde	nacte/MMCF	T	Grantty of	endenacie()	1959	
7.6	esting Method (pitot, b	ack pr.)		Tubir	3 Hrs ng Prensure (	( <del>22</del>					\		//	
	Back Pr.	,				(some-ra)		Cosing Pres	suro (Shut-is	2)	Choke Steel	- COM (	7	
		~~~~			895			8.9	25		3	DIST. 3		
, C.E.	RTIFICATE OF	COMPL	IANC	E					OIL CO	NSERVAT	ION CON	Wasion-		
							į			· · · · · · · · · · · · · · · · · · ·	. CA CON	10G 2 6	1969	
I he	ereby certify that th	e rules	and re	gulat	ions of the	Oil Conse	ervation	ADD 2 0						
Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.														
						BA OTT	amar 210	ned by	Emery	C. Arno	<del>ld</del>			
						TITLE_	SUPI	ERVISOR	DIST. #	<b>5</b>	-			
											<del></del>			
- foe 6 Dalmon do							This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepened							
(Signature)														
-	District Superintendent							well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.						
(Title)							All sections of this form must be fitted out completely to							
_	August 25	1060	•				11	able on He	M Rug tecom	bresed mells	•			
		<u> </u>	(Date	<del>,</del>		r <del> </del>	<del></del>	Fill o	ut only Sect	ions I, II, I	II, and VI	for changes	of owner.	
				•			li.	WCII name	or number, or	transporter,	o: other <b>su</b>	Ch Change of	condition.	
							1	Separe	ite Forms Cowells.	-104 must !	for	each pool	in multiply	
~ .									-					