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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator Aztec Oil & Gas Company	
Address P. O. Drawer 570, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE		Lease No.
Lease Name Harrison	Well No. #1-A	SF-080313
Pool Name, including Formation Blanco Mesaverde		Kind of Lease State, Federal or Fee
Location Unit Letter D ; 810 Feet From The North Line and 895 Feet From The West		
Line of Section 31 Township 32 North Range 10 West , NMPM, San Juan County		


III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>		P. O. Box 108, Farmington, New Mexico 87401	
Plateau, Inc.		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>		Fidelity Union Tower, Dallas, Texas	
Southern Union Gathering		Is gas actually connected? no When	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Designate Type of Completion - (X)			X	X					
Date Spudded 8-16-75	Date Compl. Ready to Prod. 9-2-75	Total Depth 5375'		P.B.T.D. 5375'					
Elevations (DF, RKB, RT, GR, etc.) 6170 GR	Name of Producing Formation Mesaverde	Top Oil/Gas Pay 4800'		Tubing Depth 5238'					
Perforations 4800-23, 4827-33, 4837-77 1 SPF 5265-5269, 5293-5327, 5355-5361, 1 SPF		Depth Casing Shoe 5375'							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
13-3/4"	9-5/8"	318'		270 sacks					
8-3/4"	7"	3131'		300 sacks					
6-1/4"	4-1/2"	Top 2991'-bottom 5375'		205 sacks					
	1-1/2"	5238'							

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL		(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL		Bbls. Condensate/MMCF		Gravity of Condensate	
Actual Prod. Test-MCF/D 13,118	Length of Test 3 Hours	Casing Pressure (shut-in) 684		Choke Size 3/4"	
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) 684				

VI. CERTIFICATE OF COMPLIANCE	
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 Superintendent (Title)	
September 15, 1975 (Date)	

OIL CONSERVATION COMMISSION SEP 17 1975	
APPROVED _____	19 _____
BY <u>Original Signed by G. W. Zambick</u>	SUPERVISOR DIST. #3
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 completed wells.	