			_
NO. OF COPIES RECEIVED		5	
DISTRIBUTION			
SANTA FE		1	
FILE		1	1
U.S.G.S.		<u> </u>	1
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS	1	
OPERATOR			<u> </u>
		1	ļ

			I
NO. OF COPIES RECEIVED 5]		
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104		
SANTA FE	REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-116 Effective 1-1-65		
FILE / V	1	AND	
u.s.g.s.	AUTHORIZATION TO TRAI	SPORT OIL AND NATURA	AL GAS
LAND OFFICE	4		
TRANSPORTER GAS /	- - -		
OPERATOR /	4		CCCILA
Operator Aztec Oil & Gas Comp	any		RILLIVED
Address		101	DEC 22 1975
P. O. Drawer 570, Fa	Thirting con; item trees.	Other (Please explain,	
Reason(s) for filing (Check proper box	Change in Transporter of:		GIL CON. COM.
New Well	Oil Dry Gas	; []	DIST 3
Recompletion Change in Ownership	Casinghead Gas Conden	sate	
Change in Connecting			
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including Fo	ormation Kind of	Lease No.
Lease Name Richardson	#12-A Blanco Mesa		SF-077651
Location			_
Unit Letter /J 145	Feet From The South Lin	e and 1450 Feet	
Line of Section 15 To	ownship 31 North Range 1	2 West , NMPM,	San Juan County
Name of Authorized Transporter of C. Plateau, Inc. Name of Authorized Transporter of C. Southern Union Gath If well produces oil or liquids, give location of tanks.	asinghead Gas or Dry Gas 💢	P. O. Box 108, Far Address (Give address to which Fidelity Union Tou Is gas actually connected? No	When
If this production is commingled w COMPLETION DATA			D 1 D 1 D 1
	ion (X)	1	i i i i i i i i i i i i i i i i i i i
Designate Type of Complet		X Total Depth	P.B.T.D.
Date Spudded	Date Compl. Ready to Prod.	5250'	
10-13-75	12-5-75 Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.)	Mesaverde	5070'	5105'
6278 GR	riesaverde		Depth Casing Shoe
Perforations 5070 5086 5092-510	04, 5118-5140, 5150-5160,	2 Shots Per Foot	5250'
3070-3080; 3032-310	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13-3/4"	9-5/8"		03' 300 Sacks 00' 1st St. 170 Sxs-2nd 330
8-3/4"	7"		
6-1/4"	4-1/2"	Top 4635'-Bottom 52	05'
	1-1/2"		
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be able for this d	after recovery of total volume of t lepth or be for full 24 hours)	oad oil and must be equal to or exceed top allow
OIL WELL 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
	OIL Phile	Water - Bbls.	Gas - MCF
Actual Prod. During Test	Oil-Bbla.	·	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	3 Hours		
10,464	Tubing Pressure (Shut-18)	Casing Pressure (Shut-in)	Choke Size

GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
10,464 Testing Method (pitot, back pr.)	1 421114 1 1000 = 1	Casing Pressure (Shut-in)	Choke Size 3/4"
Back Pressure	802		A TICKL COMMISSION

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.

Ju. a Milmer
(Signature)
// District Superintendent
(Title)
December 18, 1975
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 2 3 1975 , 19					
ORIGINAL SIGNED BY N. F. MAXWELL, JR.					
TITLE PETROLEUM ENGINEER DIST. NO.	***************************************				

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 allow-sble 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.