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DISTRIBUTION	NEW MEXICO C	III CONSERVATION COMM	SSION Form C-104
SANTA FE		NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE	
FILE		AND	Supersedes Old C-104 and C- Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO	TRANSPORT OIL AND N	IATLIDAL CAS
LAND OFFICE		THE TOTAL AND P	INTURAL GAS
TRANSPORTER OIL GAS	_		
OPERATOR			
PRORATION OFFICE Operator			
Aztec Oil & Gas (Company		
P. O. Drawer 570 Reason(s) for filing (Check proper bo	Farmington, New Mexi	co 87401 Other (Please	evnlain)
New Well	Change in Transporter of:	Omer (1 sesse	
Recompletion	Oil D	ry Gas	
Change in Ownership	Casinghead Gas C	ondensate	
If change of ownership give name and address of previous owner		18	
DESCRIPTION OF WELL AND		na Casandia	
Lease Name	Well No. Pool Name, Includi		Kind of Lease No. State, Federal or Fee Egg
Dusenberry Location	#1-A Blanco Me	sa Verde	State, Federal of Fee Fee
Unit Letter M;	870 Feet From The South	Line and 980	Feet From The West
Line of Section 6 To	wnship 31N Range	11W , NMPM,	San Juan County
DESIGNATION OF TRANSPOR			
Name of Authorized Transporter of Oi	or Condensate X		which approved copy of this form is to be sent)
Plateau, Inc. Name of Authorized Transporter of Co	singhead Gas or Dry Gas X	Address (Give address to	Farmington, New Mexico 87401 which approved copy of this form is to be sent)
Southern Union Gatherin	ng		onal Building, Dallas, Texas 752
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge	. Is gas actually connected No	When
If this production is commingled w.	ith that from any other lease or p	ool, give commingling order	number:
Designate Type of Completi	on - (X) Oil Well Gas We	New Well Workover	Deepen Plug Back Same Res'v. Diff. Res'v
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
10-2-76	10-23-76	56951	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
5630' GR	Mesa Verde	4786'	5607'
Perforations			Depth Casing Shoe
See form C-105	TURING CASING	AND CEMENTING RECORD	5695!
HOLE SIZE	CASING & TUBING SIZE	DEPTH SE	
13-3/4''	9-5/8" 36#		190
8-3/4"	7'' 20#		175
6-1/4"	4-1/2" 10.5	0# 3140-5695	250
THE TAXABLE PROVIDED TO	2-3/8 ¹¹ 4.7#		
TEST DATA AND REQUEST F OIL WELL	able for the	be after recovery of total volum is depth or be for full 24 hours)	e of load oil and must be equal to or exceed top allow
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			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
5682	3 hrs		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-	
Back pressure			g3/4"
CERTIFICATE OF COMPLIAN	CE		DNSERVATION COMMISSION
hereby certify that the rules and	regulations of the Oil Conservet	ion APPROVED	, 19
Commission have been complied whose is true and complete to the	with and that the information giv	en Original Si	gned by A. R. Kendrick

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III.

IV.

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__District_Production_Manager

November 5, 1976

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.

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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.