REQUEST FOR A AUTHORIZATION TO TRANS LAND OFFICE TRANSPORTER GAS OPERATOR PROBATION OFFICE Operator Astec Oil & Gas Company	Other (Please explain)	G. Form C-104 Supersedes Old C-104 and Effective 1-1-45
DISTRIBUTION SANTA FE FILE J.S.G.S. LAND OFFICE TRANSPORTER GAS OPERATOR PRORATION OFFICE Decrator Aztec Oil & Gas Company Address Drawer 570, Farmington, New Mexico Recogn(s) for filing (Check proper box) New Well Recompletion Change in Transporter off Oil Dry Gas Change in Ownership Change of ownership give name Ind address of previous owner DESCRIPTION OF WELL AND LEASE	R ALLOWABLE IND PORT OIL AND NATURAL GAS Other (Piease explain)	Supersedes Old C-104 and Elfoctive 1-1-65
REQUEST FOR A AUTHORIZATION TO TRANS AND OFFICE RANSPORTER OIL / GAS /	R ALLOWABLE IND PORT OIL AND NATURAL GAS Other (Piease explain)	Supersedes Old C-104 and Elfoctive 1-1-65
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d address of previous owner ESCRIPTION OF WELL AND LEASE	the result to the White	
d address of previous owner ESCRIPTION OF WELL AND LEASE		,
ESCRIPTION OF WELL AND LEASE		
ESCRIPTION OF WELL AND LEASE Well No. Pool Name, including Form		
Well No. Pool Name, including Form	nation Kind of Lease	Lease
,5136 (1411)	State, Federal	Fac
Culpepper Martin #15 Basin Dakota	State, Federal	Fee
ocation		East
Unit Letter H : 1760 Feet From The North Line	and 990 Feet From Ti	h•
		_
Line of Section 21 Township 32 North Range 12	West , NMPM,	San Juan Co
	•	
ESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		
Name of Authorized Transporter of Oil or Condensate	Address (Give address to which approve	ed copy of this form is to be sent
Plateau	Box 108 Farmington. Address (Give address to which approv	New Mexico
Name of Authorized Transporter of Casinghead Gas or Dry Gas (CC)	Address (Give address to which approv	ed copy of this form is to be sent
Southern Union Gathering	Box 398, Bloomfield. Is gas actually connected? Whe	New Mexico
Unit Sec. Twp. Rge.	Is gas actually connected? Whe	'n
If well produces oil or liquids, give location of tanks.	1	
	ive commingling order number:	
f this production is commingled with that from any other lease or pool, g	The committee order manner.	
	New Well Workover Deepen	Plug Back Same Res'v. Dill.
Designate Type of Completion - (X)		
Daylor A. Dood	Total Depth	P.B.T.D.
Date Spudded Date Compi. Heady to Prod.		•
Elevations (DF, RKB, RT, GR, etc.; Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.; Name of Producing Formation	•	
		Depth Casing Shoe
Perforations		
	ATUENTING DECORD	
TUBING, CASING, AND		SACKS CEMENT
HOLE SIZE CASING & TUBING SIZE	DEPTH SET	JACKS GENEVA
	1	
		•
TEST DATA AND REQUEST FOR ALLOWABLE (Test must be of	fter recovery of total volume of load oil	and must be equal to or exceed t
OIL WELL able for this de	pth or be for full 24 hours;	
able for this de	fter recovery of total volume of load oil pth or be for full 24 hours) Producing Method (Flow, pump, gas l	
OIL WELL able for this de	Producing Method (Flow, pump, gas i	ift, etc.)
OIL WELL able for this de	pth or be for full 24 hours;	
OIL, WELL Date First New Oil Run To Tanks Date of Test	Producing Method (Flow, pump, gas & Casing Pressure	Choke Size
OII, WELL Date First New Oil Run To Tanks Length of Test Tubing Pressure	Producing Method (Flow, pump, gas i	Choke Size Gas-MCF
OIL WELL Date First New Oil Run To Tanks Length of Test Tubing Pressure	Producing Method (Flow, pump, gas & Casing Pressure	Choke Size
OIL WELL Date First New Oil Run To Tanks Length of Test Tubing Pressure	Producing Method (Flow, pump, gas & Casing Pressure	Choke Size Gas-MCF
OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test Oil-Bble.	Producing Method (Flow, pump, gas & Casing Pressure	Choke Sise Gas-MCF GOIL CORE
OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL	Producing Method (Flow, pump, gas & Casing Pressure	Choke Size Gas-MCF
OII, WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL	Producing Method (Flow, pump, gas in Casing Pressure Water-Bbls.	Choke Sise Gas-MCF GOIL CORE
OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL	Producing Method (Flow, pump, gas in Casing Pressure Water-Bbls.	Choke Sise Gas-MCF GOIL CORE

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)

April 8. (Date)

APPROVED

If this is a request for allowable for a newly drilled or despens 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.

This form is to be filed in compliance with RULE 1104.

BYOriginal Signed by Emery C. Arnold SUPERVISOR DIST. #3

APR 1 0 1970

Fill out only Sections I. II. III. and VI for changes of owne well name or number, or transporten or other such change of condition will name or number.