NO. OF COPIES REC	5		
DISTRIBUTIO			
SANTA FE	1		
FILE	1	L	
U.S.C.S.			
LAND OFFICE			
IRANSPORTER	OIL	/	
INANSFORIER	GAS	1	
OPERATOR	1		
PROBATION OF			

SANTA FE /						NEW MEXICO OIL CONSERVATION O REQUEST FOR ALLOWAB				Form C-104 Supersedes Old C-104 and C-110		
Ì	FILE		7	1	AND				Effective 1-1-65			
j.	u.s.c.s.				AUTHORIZATION TO TI		OIL AND I	NATURAL	GAS			
	LAND OFFICE				7.5.7.6.7.7.7.7.7.6.7	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	01271110		0710			
	TRANSPORTER	OIL	/									
i !		GAS	1									
	OPERATOR		1									
ï. [	PRORATION OF	FICE	<u> </u>			<del></del>	<del> </del>					
i	Actec Oil &	Gas	Comp	any	•							
1	Address											
į	P. O. Drawer 570, Farmington, New Mexico											
		Ceason(s) for filing (Check proper box)  Other (Please explain)										
!	New Well Recompletion	M			Change in Transporter of: Oil Dry	Gas 🗌						
	Change in Ownership					densate		•			1	
ŀ	<u> </u>							· · · · · ·				
	If change of owners and address of prev			ne								
	and address of pre-	V1043 01							•	<del></del>		
.ī.	DESCRIPTION OF WELL AND LEASE Lease Name   Well No.   Pool Name, Including Formation   Kind of Lease   Lease No.											
	Lease Name					1				Fee SF-078198		
į	Nye				#3 Aztec Picti	irea CIII	ed Cliff State, rederal or ree			SF-0/8198	·	
		ī		165	South		90		1AZc	\c.+		
	Unit Letter	ъ	_ <i>i</i>	10.	Feet From The South	Line and	190	Feet From	n The We	:50		
	Line of Section	1		Tow	mship 30 North Range	ll West	, NMPA	л,	Sa	ın Juan	County	
		<del> </del>						·····				
III.	DESIGNATION O	F TRA	INSP	ORT	TER OF OIL AND NATURAL	GAŞ						
	Name of Authorized	Transpo	orter o	f OII	or Condensate 📉	Address (	Give address	to which appr	roved copy	of this form is to	be sent)	
	Plateau I	ncorp	ora	ted		Box	108, Far	mington.	New N	Mexico		
	Name of Authorized						Address (Give address to which approved cop					
	Southern	Union	Gar	ther	Unit Sec. Twp. Age.		Box 398, Bloomfield, Ne			Mexico		
	If well produces oil give location of tan		ds,		1 1 1 1 1 1 1	No		I				
	L <u></u>					<del></del>						
	If this production in COMPLETION D		ingle	d wit	h that from any other lease or po-	oi, give com	nugung orde	r number:		<del></del>		
• • •		-		1	Oil Well Gas Well	New Well	Workover	Deepen	Plug E	Back   Same Res	v. Diff. Res'v.	
	Designate Ty	pe of C	omp	letio	ı i X		<u> </u>		1	l l	1	
	Date Spudded				Date Compl. Ready to Prod.	Total De			P.B.T			
ļ		4-7-73			4-12-73		4940		T>-	4940		
	Elevations (DF, RKB, RT, GR, etc.) 5911 GR			tc.j	Name of Producing Formation Pictured Cliff	1 -	Top Oil/Gas Pay 2466		lucin	Tubing Depth 4250		
	Perforations				Fictured CIIII		400		Depth	Casing Shoe		
	2466-2473,	2478-	248	6. 2	2 SPF					4937		
	,			<del></del> -	TUBING, CASING,	MD CEMEN.	TING RECO	RD				
	HOLE	SIZE			CASING & TUBING SIZE		DEPTH SET			SACKS CEM	ENT	
	10-3/4	11			9-5/8"		193'			75 Sac		
	8-3/4				51211		4685 '			250 Sacks		
	4-3/4				3½11 1½11		4937'			40 Sacks		
	<u> </u>				<del></del>		4250'					
٧.	TEST DATA AN OIL WELL	D REG	UES	TF		e after recove depth or be f			ill and mus	t be equal to or e	xceed top allow-	
	Date First New Oil	Run To	Tank	8	Date of Test	-		w, pump, gas	lift, etc.)			
	· ·									- FEFT		
	Langth of Test				Tubing Pressure	Casing F	Casing Pressure		Choke	Choke Size		
										Gae-MCF		
	Actual Prod. During	Actual Prod. During Test			Oil-Bbls.	Water - B	Water-Bbls.		Gas.	Gas-MCF		
	l				<u></u>		····		Щ	7-7-1/ 79 5	<del>) 1973    </del> -	
	C ( C 1777 1									YOU CON.	COM	
	CAS WZLL Actual Prod. Test.	MCF/D			Length of Test	Bbls. Co	ndeneate/MM	CF	Gravi	ty of Condengare		
	1131				3 Hours	Ì						
	Testing Method (pi	tot, back	k pr.)		Tubing Pressure (Shut-in)	Casing F	ressure (Shu	t-in)	Chok	e Size		
	Back Pre	ssure	•				365		1	3/4"		
٧ <u>"</u> .	CERTIFICATE	OF CO	MPL	JAN	CE		OIL	CONSERV	VATION	COMMISSION	N	
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above in true and complete to the best of my knowledge and belief.						APPROVED					
					!}	ATTENDED DIST. #3						
						11	1)					
	() A.						This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a nawly drilled or despended well, this form must be accompanied by a tabulation of the deviation.					
	Signature)											
	District Superintendent (Title)						tests taken on the well in accordance with RULE 111.  All sections of this form must be filled out completely for allows able on new and recompleted wells.					
		ril 4	24	107	3-		Hill Am Sale martians ; it till and VI for changes of containment name or nambel, at the containing of contains					
			• •.	441.	iste t			er, ar nesser es Callel e				