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DISTRIBUTIO				
SANTA FE	1			
FILE)			
u.s.g.s.				
LAND OFFICE	1			
IRANSPORTER	OIL			
THE AST ON LA	GAS			
OPERATOR	2			
	i			

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110

FILE		1			AND	Effective 1-1-65		
U.S.G.S.		-		AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL G	AS ·		
LAND OFFICE	OIL	 						
TRANSPORTER	GAS	17	<u> </u>					
OPERATOR		2						
PRORATION OF	FICE	1						
Operator								
Aztec Oil	& Gas	s_Co	mpa	ny				
Address		c 70	T.	numinatar Nav Naviga 9	7401	,		
Reason(s) for filing					7401 Other (Please explain)			
New Well		, ope.	•••	Change In Transporter of:	Since (1 tease explain)	:		
Recompletion				Oil Dry Ga	ns X			
Change in Ownership				Casinghead Gas Conder	nsate 🔲			
ind address of prev	ious ow	e nan	16 P	Aztec Oil & Gas Company,	P. O. Drawer 570, Farmi	ngton, New Mexico 87401		
DESCRIPTION O	F WEL	L A	ND I	Well No. Pool Name, Including Fo	ormation Kind of Lease	Jicarilla Lease No.		
Arizona Ji	caril	1a	''A''	#4 South Blanco F	Pictured Cliffs State, Federal	or Fee Contract #124		
Location								
Unit Letter	M		7 90	Feet From The South Lin	se and 1190 Feet From T	heWest		
Onit Letter		. •						
Line of Section	24		Tow	mship 25 North Range	4 West , NMPM,	Rio Arriba County		
Name of Authorized	F TRA	NSP	ORI	FER OF OIL AND NATURAL GA	Address (Give address to which approv	ed copy of this form is to be sent)		
Acme of Assistant	,							
Name of Authorized	Transpor	rie: of	Cas	inghead Gas or Dry Gas X	Address (Give address to which approv	ed copy of this form is to be sent)		
				y Mexico	First International Bld	g. Dallas Texas 75270		
If well produces on			1101	Unit Sec. Twp. P.ge.	Is gas actually connected? Whe	r.		
give location of tank				1 !				
f this production is	s commi	ngled	with	h that from any other lease or pool,	give commingling order number:			
COMPLETION D	ATA			Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'y, Diff. Res'y,		
Designate Typ	pe of C	omp!	etio		1 1			
Date Spudded				Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Said Speader								
Elevations (DF, RK)	B, RT, G	R, etc	:. <i>j</i>	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
Perforations						Depth Casing Shoe		
<u></u>				MINDING CALING AND	CEMENTING PECORD			
	6175			CASING & TUBING SIZE	D CEMENTING RECORD DEPTH SET	SACKS CEMENT		
HOLE	3122			CASING & FOOTING SIZE				
TEST DATA AN	D REQI	CEST	FC	RALLOWABLE (Test must be a)		nd must be equal to or exceed top allow-		
DH. WELL				Date of Test	pth or be for full 24 hours) Producing Method (Flow, pump, gas life	etc.)		
Date First New Oil	Hun To T	cnss		Date of 188:	riodating memoral result beautiful			
Length of Test				Tubing Pressure	Casing Pressure	Choke Size		
Langin or root								
Actual Prod. During	7.es:			Oil-Bbls.	Water-Bbls.	Gas-MCF		
GAS WELL					Bble, Condensate/MMCF	[C		
Actual Prod. Test-	MCF/D			Length of Test	Bule, Concensate/MMCF	Gravity of Condensate		
Testing Method (pit	or back	nr I		Tubing Pressure (Shut-in)	Coming Pressure (Shut-in)	Choke Size		
, esting Method (ph)	D., Duca	p)		techny riobbano (blice 22)				
TED GUELGAGE (E COV	(DI)	ANC) E	OIL CONSERVA	TION COMMISSION		
CERTIFICATE OF COMPLIANCE				MAV 9 1072				
hereby certify that the rules and regulations of the Oil Conservation lommission have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.		APPROVED NOV 2 1976 , 19						
		Original Signed by A. Fondrick						
SUPERVISOR DIST.				e de la companya de				
	TITLE							
	This form is to be filed in compliance with RULE 1104.							
	_X)[an fexan	If this is a request for allowable for a newly drilled or despend			
		•	•	(we)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 111.			
Dis	trict	t Su		intendent	All acctions of this form must be filled out completely for allow-			
(Title) able on new and recompleted wells.					11.			
UC.	October 29, 1976 Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of conditions.							
			100	,	Canada Forms C-104 must be filed for each nool in multiply			