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SANTA FE			
FILE		1	/
U.S.G.S.			I
LAND OFFICE			
TRANSPORTER	OIL		
	GAS	T	
OPERATOR		1	
PRORATION OFFICE			
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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65		
i	U.S.G.S.	ALITHODIZATION TO TRA	AND ANSPORT OIL AND NATURAL			
	LAND OFFICE	AUTHORIZATION TO TRA	AND ON TOTE AND TATIONAL	CAS		
	IRANSPORTER OIL					
	OPERATOR					
I.	PRORATION OFFICE					
	Cperator	1 0				
-	Continental Oil Company					
	P. O. Box 3312	, Durange, Colorado				
	Reason(s) for filing (Check proper box)		Other (Please explain)			
	Hew Well Recompletion	Change in Transporter of: Oil Dry Ga	ıs [
	Change in Ownership	Casinghead Gas Conder	nsate			
	If change of ownership give name					
	and address of previous owner					
II.	DESCRIPTION OF WELL AND L	EASE				
	Lease Name AXI Apache "J"	Well No. Pool Na	me, Including Formation Otero Checra	Kind of Lease State, Federal or Fee Federal		
	Location		Areto cutters	receiai		
	Unit Letter A ; 990	Feet From The Morth Lir	ne andFeet From	The East		
		ACW D	SV , NMPM, R	io Arriba County		
	Line of Section , Town	nship 25M Range	, NMPM,	10 AFFIDE County		
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	AS			
	Name of Authorized Transporter of Oil Or Condensate Address (Give address to which approved copy of this form is to be sent)					
	Name of Authorized Transporter of Casi	nghead Gas or Dry Gas	Address (Give address to which appr	roved copy of this form is to be sent)		
	Southern Union Gas Co			Dallas, Texas		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.		/hen		
	give location of tanks.		No.			
	If this production is commingled with COMPLETION DATA					
	Designate Type of Completion	Oil Well Gas Well	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.		
	6-7-65	7-2-65	38831	38471		
	Poel	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Otero Perforations	Chaora	3746'	Depth Casing Shoe		
	Perioritions			38831		
			D CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	202 •	SACKS CEMENT 150 sacks		
	12\ ¹ 7-7/8 ⁴	8-5/8" 4-1/2"	38831	375 gacks		
	101,0	1-1/2"	3707'			
		1"	2915'			
V	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours)					
	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 lize		
	Length of Yest			AUG 1 2 100		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCFO/L 67/32		
				Die Colle		
	GAS WELL					
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	1776 MCPD	3 hours	Casing Pressure	Choke Size		
	Testing Method (pitot, back pr.)	Tubing Pressure	packer	3/4*		
VI	. CERTIFICATE OF COMPLIANCE	<u>140 #</u>	OIL CONSER\	VATION COMMISSION		
٠.	. CENTIL OF COMPENS			ned Emery C. Arnold		
	I hereby certify that the rules and r Commission have been complied v	regulations of the Oil Conservation	APPROVED	AUG 1 2 1965		
above is true and complete to the best of		best of my knowledge and belief.		. # 2		
			TITLE Supervisor Dis	L # 3		
	Original Sig	ned By:		n compliance with RULE 1104.		
	H. D. HALEY		If this is a request for allowable for a newly drilled or deepened			
	, -	(Signature)		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
	<u> </u>	District Menager (Title)		All sections of this form must be filled out completely for allowable on new and recompleted wells.		
August 9, 1965			Fill out Sections L. H. I	II. and VI only for changes of owner,		
	(De	ute)	well name or number, or transp	orter, or other such change of condition. oust be filed for each pool in multiply		
	minocc(A) Ric		completed wells.			