NO. OF COPIDS RECEIVED			3	
DISTRIBUTION				
SANTA FE				
FILE	/_	_		
U.S.G.S.		L_		
LAND OFFICE	<u> </u>			
I DANSBORT ER	OIL	/		
INANSPORTER	GAS	[/		
OPERATOR	1			
PRORATION OF	<u>L'</u>	<u> </u>		
TRANSPORTER OPERATOR	GAS	<i>1 1</i>		

i	DISTRIBUTION			NEW MEXICO OIL CO	NSERVATION COMMISSION	Form C-104			
	SANTA FE			REQUEST F	OR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65			
	FILE	1		í	AND				
	U.S.G.S.		<u> </u>	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL	GAS			
•	LAND OFFICE								
	TRANSPORTER GAS	7							
	OPERATOR	1		i					
	PRORATION OFFICE	11	1						
E.	Operator								
	Bird Oil Equipm	ent	of	Oklahoma, Ltd.					
	Address				1-1				
	3101 Knudsen, F	amı	ing	ton. NM 87401					
	3101 Knudsen, Farmington, NM 87401  Reason(s) for filing (Check proper box)  Other (Please explain)								
	New Well			Change in Transporter of:					
	Recompletion			Oil V Dry Gas					
	Change in Ownership			Casinghead Gas Condens	ate				
,	If change of ownership giv	e nar	ne	Aztec Oil & Gas Company.	Drawer 570, Farmingt	on, NM 87401			
	and address of previous owner R2000 OII & OB COMPANY, Daniel Day								
11.	DESCRIPTION OF WEI	LA	ND .	Well No. Pool Name, Including For	mation Cha Kind of Lea				
	Southeast Cha C	ha	Uni		Cha Cha State, Fede	eral or Fee NM-09979			
	Location					<u> </u>			
	Unit LetterJ	_ ;	19	20 Feet From The South Line	and 2120 Feet From	n The East			
	Line of Section 15		Toy	waship 28 North Range 13	West , NMPM, Sar	n Juan County			
Ш.	DESIGNATION OF TRA	INSP	OR	FER OF OIL AND NATURAL GAS	Address (Give address to which app	roved copy of this form is to be sent)			
	Name of Authorized Transpo	orter o	91 O11	Sr Condensate		, Farmington, NM 87401			
	Plateau Inc.			550 See 5	Address (Give address to which app	roved copy of this form is to be sent)			
	Name of Authorized Transpo			ł		l l			
	El Paso Natural	. Ga	s C		Box 990, Farmington,	NM 0/401			
	If well produces oil or liquid give location of tanks.	is,		Unit Sec. Twp. P.ge.	is gas actually connected?	nien			
	If this production is comm	ingle	d wi	th that from any other lease or pool, g	ive commingling order number:				
IV.	COMPLETION DATA	6				Plug Back   Same Res'v. Diff. Res'v.			
•••		`	1.42	011	New Well Workover Deepen	Plug Back Suite Nes V. Ditti Nes V.			
	Designate Type of (	omp	letic	$\operatorname{on} - (\lambda)$					
	Date Spudded			Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
						Tonio Poth			
	Elevations (DF, RKB, RT,	GR, e	tc.;	Name of Producing Formation	Top Oil/Gas Pay	THE STATE OF THE S			
				Death Sessing Silve					
	Perforations								
						1015 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
				TUBING, CASING, AND		A OF STREET			
	HOLE SIZE			CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
						ON CON			
						CAN DIST 3			
v	TEST DATA AND REC	UES	T F	OR ALLOWABLE (Test must be aft	er recovery of socal volume of load	oil and must be equal to or exceed top allow-			
▼ .	OIL WELL			2000 /0" //// 001					
	OIL WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)								
					Casing Pressure	Choke Size			
	Length of Test			Tubing Pressure	Control Lines ma				
	l				Water - Bbls.	Gas-MCF			
	Actual Prod. During Test			Oil-Bbis.					
	<u></u>								
	GAS WELL			Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	Actual Prod. Test-MCF/D	•		Length of 1981					
				(2)	Casing Pressure (Shut-in)	Choke Size			
	Testing Method (pitot, bac	k pr.)		Tubing Pressure (Shut-in)					
				<u> </u>	211 6011555	VATION COMMISSION			
VI	CERTIFICATE OF CO	MPI	LIAN	ICE	1	OFD 3 4 403F			
				1. 44	45550455	SEP 2 4, 1975			
I hereby certify that the rules and regulations of the Oil Conservation			regulations of the Oil Conservation	APPROVED					
		numission have been complied with and that the information given by original Signed by A. R. Kendrick ve is true and complete to the best of my knowledge and belief.  TITLE SUPERVISOR DIST. 43							
	above is true and comp								
	This form is to be filed in compliance with RULE 1104.								
	15/1/2	A land of despet							
	1 JXX	<u> </u>	781-	nature)	well, this form must be accorded tests taken on the well in a				
-						must be filled out completely for allow			
		_	/>		ii All sections of this lors				

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 transporten or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.