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OPERATOR	3
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

1. Operator \_\_\_\_\_  
Address \_\_\_\_\_  
P. O. Drawer 570, Farmington, New Mexico 87401  
Reason(s) for filing (Check proper box) \_\_\_\_\_ Other (Please explain) \_\_\_\_\_  
New Well ☐ Change in Transporter of: \_\_\_\_\_  
Recompletion ☐ Oil ☐ Dry Gas ☐ \_\_\_\_\_  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐ \_\_\_\_\_  
Name change  
If change give name and address of previous owner \_\_\_\_\_ Aztec Oil & Gas Company, P. O. Drawer 570, Farmington, New Mexico 87401

II. DESCRIPTION OF WELL AND LEASE  
Lease Name \_\_\_\_\_ Well No. \_\_\_\_\_ Pool Name, Including Formation \_\_\_\_\_ Kind of Lease \_\_\_\_\_ Lease No. \_\_\_\_\_  
La Baca #1 Blanco Mesaverde State, Federal or Fee Federal NM-2991  
Location \_\_\_\_\_  
Unit Letter B, 790 Feet From The North Line and 820 Feet From The East  
Line of Section 1 Township 29 North Range 5 West NMPM San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☐ or Condensate ☒ Address (Give address to which approved copy of this form is to be sent) \_\_\_\_\_  
Plateau, Inc. P. O. Box 108, Farmington, New Mexico 87401  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent) \_\_\_\_\_  
Northwest Pipeline Corporation P. O. Box 93, Farmington, New Mexico 87401  
If well produces oil or liquids, give location of tanks. \_\_\_\_\_

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

IV. COMPLETION DATA  
Designate Type of Completion - (X) \_\_\_\_\_  
Date Spudded \_\_\_\_\_ Date Compl. Ready to Prod. \_\_\_\_\_ Total Depth \_\_\_\_\_ P.B.T.D. \_\_\_\_\_  
Elevations (DF, RAB, RT, GR, etc.) \_\_\_\_\_ Name of Producing Formation \_\_\_\_\_ Top Oil/Gas Pay \_\_\_\_\_ Tubing Depth \_\_\_\_\_  
Perforations \_\_\_\_\_ Depth Casing Shoe \_\_\_\_\_  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE \_\_\_\_\_ CASING & TUBING SIZE \_\_\_\_\_ DEPTH SET \_\_\_\_\_ SACKS CEMENT \_\_\_\_\_

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable 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 \_\_\_\_\_  
Actual Prod. During Test \_\_\_\_\_ Oil-Bbls. \_\_\_\_\_ Water-Bbls. \_\_\_\_\_

GAS WELL  
Actual Prod. Test-MCF/D \_\_\_\_\_ Length of Test \_\_\_\_\_ Bbls. Condensate/MMCF \_\_\_\_\_ Gravity of Condensate \_\_\_\_\_  
Testing Method (pitot, back pr.) \_\_\_\_\_ Tubing Pressure (Shut-in) \_\_\_\_\_ Casing Pressure (Shut-in) \_\_\_\_\_ Choke Size \_\_\_\_\_

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)  
\_\_\_\_\_  
(Title)  
1-1-78  
(Date)  
OIL CONSERVATION COMMISSION  
JAN 12 1978  
APPROVED \_\_\_\_\_, 19\_\_\_\_\_  
BY \_\_\_\_\_ Original Signed by A. R. Kendrick  
TITLE \_\_\_\_\_ SUPERVISOR DIST. #3  
This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened 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.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.