| ٢ | NO. OF COPIES PECEIVED | | |
|------------|----------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-------------------------------------------|
| | DISTRIBUTION 7 | NEW MEXICO OIL CON | NSERVATION C |
| | SANTA FE / | | OR ALLOWAR |
| 一 | FILE / | | AND |
| | U.S.G.S. | AUTHORIZATION TO TRAN | SPORT OIL A |
| | LAND OFFICE | | |
| | OIL / | | |
| | TRANSPORTER GAS | | |
| - | OPERATOR 3 | | |
| ι. Γ | PRORATION OFFICE | | |
| | Operator | | |
| | | * * * * * * * * * * * * * * * * * * * | |
| - | Address | | |
| | P. O. Drawer 570, Far | mington, New Mexico 874 | 01 |
| t | Reason(s) for filing (Check proper box) | | Other (|
| | New Well | Change in Transporter of: | <u> </u> |
| - 1 | Recompletion | Oi! Dry Gas | |
| | Change in Ownership | Casinghead Gas Condense | 2:e e:= |
| <u>!</u> _ | | | |
| 1 | Change give name | Aztec Oil & Gas Company, | P. O. Dra |
| ā | and address of previous owner | | • |
| 1. | DESCRIPTION OF WELL AND L | EASE | |
| | Lease Name | Well No. Pool Name, Including For | mation |
| | East | #8 Basin Dakota | |
| İ | Location | | |
| | Unit Letter 'P : 790 | Feet From The South Line | and 790 |
| | Unit Cetter, | | |
| | Line of Section 26 Town | nship 31 North Range 12 | . West · |
| . 1 | | | |
| Ħ | DESIGNATION OF TRANSPORT | ER OF OIL AND NATURAL GAS | <u> </u> |
| ••· [| Name of Authorized Transporter of Oil | or Condensate 🛣 | Addiese forte no |
| Ì | Plateau. Inc. | | P. O. Box |
| : | | | Markey Oracle |
| | | | |
| | en de la composition | | |
| ; | give location of tanks, | | |
| | If this production is commingled with | h that from any other lease or pool, g | ive comminglin |
| v. | COMPLETION DATA | | New Well Wor |
| | Designate Type of Completio | | New Well Hol |
| | Designate Type of Completion | | == |
| | Dete Spuddea | Date Compl. Reday to Frod. | Total Depth |
| | | | |
| | Elevations (DF, RKB, RT, GR, etc., | Name of Producing Formation | Top Oil/Gas Pa |
| | | | |
| | Perforations | | |
| | | | |
| | | TUBING, CASING, AND | |
| | HOLESIZE | CASING & TUBING SIZE | DE |
| | | | · |
| : | | | |
| | | | |
| | | | <u> </u> |
| v. | TEST DATA AND REQUEST F | OR ALLOWABLE (Test must be of | ter recovery of so pth or be for full. |
| | OIL WELL | Date of Test | Producing Meth |
| | Date First New Oil Run To Tanks | | - |
| | | Tubing Pressure | Casing Pressur |
| | Length of Test | 1 doing Press me | - |
| | | 100.550 | Warer-Bris. |
| | Actual Prod. During Test | 011-3518. | • |
| | <u></u> | | <u>:</u> |
| | | | |
| , | GAS WELL Actual Prod. Test-MCF/D | Length of Test | Bals. Condens |
| i | Actual Prod. 1881-MOF/D | 2004 | |
| • | Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Cosing Pressur |
| | .es.ing Method (pitot, back pr.) | | |
| | | ar. | |
| VI | . CERTIFICATE OF COMPLIAN | CE | |
| | | and the Oil Conservation | APPROVE |
| | | regulations of the Oil Conservation with and that the information given | |
| · • | above is true and complete to th | e best of my knowledge and belief. | BY |
| | | | TITLE |
| | | | |
| | | | This fo |
| | | Gir & Comment | If this |
| | | nature). | well, this fi tests taken |
| | District | | All sec |
| | | itle)] | able on nev |

(Date)

SERVATION COMMISSION

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

| REQUEST FOR ALLOWABLE | Effective 1-1-65 |
|---------------------------------------------|------------------|
| AND | |
| HORIZATION TO TRANSPORT OIL AND NATURAL GAS | |

| Other (Please explain) | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--|
| ne District (7:232 Explain) | April Committee | |
| | lington, New Mexico 37401 | |
| nation Kind of Lease | 1 - | |
| | erFee Federal SF-077553 | |
| and 790 Feet From T | | |
| Address (Give address to which approved to the proving to the province of the | ton, New Mexico 87401 Led copy of this form is to be sent; | |
| ive commingling order number: | | |
| New Well Workover Deepen | Plug Book Same Resty, Diff. Resty, | |
| Total Depth Top Cil/Gas Pay | Tubing Depth | |
| 305 0 0 | Depth Casing Shoe | |
| CEMENTING RECORD DEPTH SET | SACKS CEMENT | |
| | | |
| ter recovery of socal volume of load oil oth or be for full 24 hours) | and must be equal to or exceed top allow- | |
| Producing Method (Flow, pump, gas l | ift, etc.) | |
| Casing Pressure | Choke Size | |
| Water-Bois. | Gas-MCF | |
| In the Continue of the Continu | Gravity of Condensate | |
| Bais, Condensate/AMOF Cosing Pressure (Shut-in) | Choke Size | |
| | ATION COMMISSION 2.1978 | |
| Original Signed by A. R. Kendrick | | |
| TITLE This form is to be filed in If this is a request for all well, this form must be accomptests taken on the well in soo all sections of this form must be accompted to the sections. | nust be filled out completely for allow- | |