DISTRIBUTION

**	SANTA FE / FILE / U.S.G.S.	REQUEST I	DIVISERVATION COMMISSION FOR ALLOWABLE AND NSPORT OIL AND NATURAL GA	Form C-10/ Superscries Old C-104 and C-116 Effective 1-1-65
	LAND OFFICE IRANSPORTER OIL / GAS / OPERATOR 3			
1.	Operator Antico Otl & Cos Co	mpany		
	Aztec Oil & Gas Company Address 2000 First National Bank Bldg., Dallas, Texas 75201			
	Reason(s) for filing (Check proper box) New Well Change in Transporter of: Recompletion Oil Dry Gas			
	Change in Ownership X	Casinghead Gas Conden		
	If change of ownership give name and address of previous owner	Acoma Oil Corporation,	Hamm Bldg., St. Paul, Mir	nnesota 55102
II.	DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease			
	Sarah M. Hedges	2 Basin	Dakota	State, Federal or Fee Fee
			e and 1060 Feet From Th	e East Juan County
m	DESIGNATION OF TRANSPORT			
****			Address (Give address to which approve P.O. Box 2151, Farming	
	Name of Authorized Transporter of Casinghead Gas or Dry Gas El Paso Natural Gas Co.		Address (Give address to which approved copy of this form is to be sent) Box 1492, El Paso, Texas	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? When	
	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,	give commingling order number:	
	Designate Type of Completion	on - (X) Gas Well X	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Date Spudded 5-8-61	Date Compl. Ready to Prod. 7-6-61	Total Depth 7340	P.B.T.D. 7324
	Pool Basin Dakota	Name of Producing Formation Dakota	Top Oil/Gas Pay 7146	Tubing Depth 7104
	7292-82, 7274-70, 7254-30, 7221-17, 7213-08			Depth Casing Shoe 7337 ·
	HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	CEMENTING RECORD DEPTH SET	SACKS CEMENT
		10-3/4	205 5275	150 433
		4-1/2" liner	5158-7337	250
v.	TEST DATA AND REQUEST FO		710 ¹ 4 fter recovery of total volume of load oil ar	ad must be equal to or exceed top allow-
	Oll WELL Date First New Oil Run To Tanks	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas lift,	etc.)
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oil-Bbis.	Water - Bbl	Gas - MCF
	GAS WELL		JUL 9 1968	
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Candensate/MXCN, COM.	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Presses	Choke Size
VI.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	FION COMMISSION
ć	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.		BY Original Signed by Emery C. Arnold	
			TITLESUPERVISOR DIST. #5	
	1/1/1 Lice L. M. Stevens		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened	
	(Signature) District Superintendent		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
	(Title)		All sections of this form must be filled out completely for allowable on new and recompleted wells.	
	July 3, 1968 (Date)		Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.	

able on new and recompleted wells.

Fill out Sections I, II, III, and VI only 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.