NO. OF COPIES RECEIVED	5			
DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSION	Form C-104	
SANTA FE /	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C Effective 1-1-65	
FILE		AND		
u.s.g.s.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS	
LAND OFFICE	· · · ·			
RANSPORTER GAS /	r			
OPERATOR V				
PRORATION OFFICE				
gerata			· · · · · · · · · · · · · · · · · · ·	
Aztec Oil & Gas Com	pany			
	armington, New Mexico			
Reason(s) for filing (Check proper		Other (Please explain)		
tiew Well	Change in Transporter of:			
Redompletion X	oil 🔲 Dry G	as		
than se in Cwnership	Casinghead Gas Conde	ensate		
If change of ownership give nar	ne			
and address of previous owner				
DESCRIPTION OF WELL A	ND LEASE	ame, Including Formation	Kind of Lease	
Learne Name			State Federal or Fee	
Decker "A"	1 EL	anco Mesaverde	State	
0	990 Feet From The West Li	ine and 990 Feet From	The North	
Unit Letter;;	Feet From The NCBO LI	ine andFeet From	tue	
Line of Section 3	, Township 31N Range	12W , NMPM, San	Juan County	
			<u> </u>	
DESIGNATION OF TRANSP	ORTER OF OIL AND NATURAL G	AS		
Mame of Authorized Transporter o	f Oil or Condensate	Address (Give address to which appr	oved copy of this form is to be sent)	
Name of Anthorized Transporter o	f Casinghead Gas 🔃 💮 or Dry Gas 🔀	Address (Give address to which appr	oved copy of this form is to be sent)	
Southern Union Gas		Box 398, Bloomfield, W	New Mexico	
If well produces off or liquids,	Unit Sec. Twp. Rge.		! ! !-	
give location of tanks.		Yes	11/10/65	
	d with that from any other lease or pool	, give commingling order number:		
COMPLETION DATA	Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res	
Designate Type of Comp	letion = (X)	x	x	
Latte Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
10/30/65	11/10/65	5200	Que participa properiore	
Loci	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Blanco Mesaverde	Mesaverde	4850	Depth Casing Shoe	
Perforations	soo so hork a hore so	53.0 1.0		
4050=50, 4003=00, 45	900-10, 4954-61, 4986-90, 4	ND CEMENTING RECORD	5200	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
711		5200	200	
	4½" - vt. 9.5# 2-3/8" - vt. 4.7#			
	2=3/0 = W60 40 (#	5135		
TEST DATA AND REQUES	T FOR ALLOWABLE (Test must be	after recovery of total volume of load oi	l and must be equal to or exceed top all	
OIL WELL	able for this e	depth or be for full 24 hours)	7:6	
Leate First New Oil Bur. To Tanks	Date of Test	Producing Method (Flow, pump, gas	igh, etc.)	
	Tubing Pressure	Casing Pressure	Choke biter	
Length of Test	Turning Pressure	Cdshig 11035are	MANUL! LD	
Actual Frod. During Test	Oil-Bbls.	Water-Bbls.	Gas MCF DEC 3 0 1965	
The state of the s			UEL 3 G INTER	
			OIL CON. COM.	
GAS WELL			DIST, 3	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Sondensate	
2525	3 hour			
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
Back Pressure	203	1,71;	3/4	
. CERTIFICATE OF COMPL	_ 🗸	OIL CONSERV	ATION COMMISSION	
		nen 30 106	5	
I hereby certify that the rules	and regulations of the Oil Conservation	APPROVED DEC 29 1965 , 19		
Commission have been complete to	ied with and that the information giver o the best of my knowledge and belief	Original Signed	BY Original Signed Entery C. Arnold	
	2 2	I I		
		TITLE Supervisor Dist. # 8	-	
CRIGINAL SIGNED BY JOE (SALMON	This form is to be filed in	compliance with RULE 1104.	
	Joe C. Salmon	If this is a request for allo	owable for a newly drilled or deeper	
	(Signature)	well, this form must be accomp tests taken on the well in acc	panied by a tabulation of the deviate ordance with RULE 111.	
	• · • • ·	T I		

District Superintendent

 ${\tt December_28, 1965}$

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.

 $\,$ All sections of this form must be filled out completely for allowable on new and recompleted wells.