NO. OF COPIES MEC			
DISTRIBUTIO			
SANTA FE			
FILE		C	
U.S.G.S.			
LAND OFFICE	<u> </u>		
TRANSPORTER	OIL		
IRANSFORTER	GAS	1	l
OPERATOR			
DECRATION OFFICE			1

DISTRIBUTIO	/N				OR ALLOWABLE Supervised Solid C-104 and C-116			
SANTA FE FILE					AND Effective 1-1-65			
U.S.G.S.				1	SPORT OIL AND NATURAL	GAS		
LAND OFFICE				ACTION LATION TO THAN				
TRANSPORTER	OIL	1						
	GAS	/		1				
PRORATION OFF				1		100		
Operator	, C E	<u> </u>				16		
Aztec Oil 8	Gas	Com	par	ny				
Address	57	n 17		nington. New Mexico 8740	1	China a c		
P. U. Drawe Reason(s) for filing	Check	D, F	box		Other (Please explain)			
New Well		•		Change in Transporter of:				
Recompletion				Oil Dry Gas				
Change in Ownership	p			Casinghead Gas Condens	ate			
f change of owners	hip giv	e nan	ne					
nd address of prev	ious ov	vner_						
DESCRIPTION O	F WEI	LL A	ND	LEASE	Vind of Loa	se Lease No.		
Lease Name				Well No. Pool Name, including to		ral or Fee Federal SF-079269		
Lawson				#1-A Blanco Mesa V	erde	rederar pr-0/9209		
Location / I	,		04	00 Month	and 970 Feet From	The West		
Unit Letter		- i	9	90 Feet From The North Line	and 3/U reet from			
Line of Section	12		Tov	wnship 31 North Range 11	West , NMPM,	San Juan County		
DESIGNATION O	F TRA	ANSP	OR'	TER OF OIL AND NATURAL GAS	Address (Give address to which app	roved copy of this form is to be sent)		
Name of Authorized		orter O	. 011	3. Co.ido.idaio [A]	P. O. Box 108, Farmir	ngton, New Mexico 87401		
Plateau, In	nc. Transpo	orter o	f Ca	singhead Gas or Dry Gas X	Address (Give address to which app	roved copy of this form is to be sent)		
Gas Company				i	Fidelity Union Tower,			
If well produces oil				Unit Sec. Twp. Ege.	is gas actually commercial	Vhen		
give location of tan	ks.				No			
If this production i	s comm	ingle	d wi	th that from any other lease or pool, g	give commingling order number:			
COMPLETION D	ATA_			Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v		
Designate Ty	pe of (Comp	leti	on – (X)	Х			
Date Spudded				Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
8-06-76				9-09-76	5290° Top Oil/Gas Pay	Tubing Depth		
Elevations (DF, RK	B, RT,	GR, e	tc.j	Name of Producing Formation	-	5233¹		
5981 GR				Mesa Verde	4313'	Depth Casing Shoe		
Perforations	e ጥጌ።	e D	eno	ort For Perforations		5290'		
See Back O	r ini	.5 K	ebo	TUBING, CASING, AND	CEMENTING RECORD			
HOLE	SIZE			CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
13-3/4"				9-5/8''	236'	190 Sacks		
8-3/4"				7"	3043'	180 Sacks 240 Sacks		
6-1/4''				4-1/2"	2900'-5290' 5233'	640 Sacks		
				2-1/16"		oil and must be equal to or exceed top allo		
TEST DATA AN	ID RE	QUES	ot F	FOR ALLOWABLE (Test must be af able for this de	pth or be for full 24 hours)			
Date First New Oil	Run To	Tank		Date of Test	Producing Method (Flow, pump, gas	tift, etc.)		
					Choke Size			
Length of Test				Tubing Pressure	Casing Pressure			
1	o Test			Oil-Bbls.	Water-Bbls.	Gas-MCF		
Actual Prod. Durin	ig 1est			J. 22				
l								
GAS WELL					Tau a 1 aa 65	Gravity of Condensate		
Actual Prod. Test	-MCF/I)		Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
7284		, .		Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
Testing Method (p			1	Tubing Pressure (Shut-In) 618 Psig	759 Psig	3/4"		
Back Pres						VATION COMMISSION		
CERTIFICATE	OF C	UMPI	JIA.	HOE	CI	EP 3 0 1977, 19		
I barabu aaraifu f	hat the		. and	d regulations of the Oil Conservation	APPROVED	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
					Original Sig	gned by A. R. Kendrick		
above is true an	d comp	olete	to t	he best of my knowledge and belief.	TITLE	الأخف بالقعيدين الرازات		
				////	I I			
	6	\sim) /	V V. /	This form is to be filed	in compliance with RULE 1104.		
	-X-		\angle	an Kyan		liowable for a newly drilled or despen mpanied by a tabulation of the deviati		
				gnature)	I seets taken on the Well in a	CCOLDERGA MILLI MARE		
Dist	rict	Pro	auc	ction Manager	All sections of this form	must be filled out completely for allo		

(Title)

1976 (Date)

September 21.

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.

PERFORATIONS:

4961', 4972', 4981', 5009', 5015', 5021', 5033', 5036', 5043', 5060', 5063', 5074', 5260'.

4313', 4350', 4358', 4441', 4449', 4457', 4469', 4479', 4503', 4564', 4567', 4580', 4585', 4727', 4731', 4774', 4786', 4799', 4819', 4827', 4880', 4906'.