NO. OF COPIES RECEIVED		İS		
DISTRIBUTION				
SANTA FE		1		
FILE		1	_	_
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL	1		
	GAS	1		
OPERATOR		1		
PRORATION OFFICE				

NO. OF COPIES RECEIVED					
DISTRIBUTION	NEW MEXICO OIL, CO	CO OIL CONSERVATION COMMISSION Form C-104			
SANTA FE /]	FOR ALLOWABLE	Supersedes Old C-104 and C-110		
FILE /		AND	Effective 1-1-65		
U.S.G.S.	AUTHORIZATION TO TRAN	NSPORT OIL AND NATURAL GAS	S		
LAND OFFICE	No monitor for the in-		•		
OIL (
TRANSPORTER GAS					
OPERATOR /					
PRORATION OFFICE					
Operator	<u></u>				
Aztec Oil & Gas (Company				
Address					
P. O. Drawer 570,	Farmington, New Mexico				
Reason(s) for filing (Check proper box)	Other (Please explain)	-		
New Well	Change in Transporter of:				
Recompletion	Oil Dry Gas	s []			
Change in Ownership	Casinghead Gas Condens	sate			
If change of ownership give name					
and address of previous owner					
I DECORPORION OF WELL AND	FEACE				
II. DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fo	ormation Kind of Lease	Lease No.		
Davis	2-A Blanco Mesa	Verde State, Federal o	rFee SF-077648		
Location / B 80	00 North	1820	East		
Unit Letter;	OO Feet From The North Line	e andFeet From The	•		
11	washin 31N Range	12W NMPM San Jua	an o		
Line of Section 11 To	wnship SIN Range	12W , NMPM, San Jua	County		
		_	•		
II. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GAS	Address (Give address to which approved	conv of this form is to be sent)		
Name of Authorized Transporter of Oil	or Condensate X	P. O. Box 108, Farmington, New Mexico			
Plateau, Inc.		Address (Give address to which approved copy of this form is to be sent)			
Name of Authorized Transporter of Ca					
Southern Union Ga		P. O. Box 1899, Bloomfield, New Mexico			
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When			
give location of tanks.	1 1	No			
ve dia and and an anominated wi	th that from any other lease or pool,	give commingling order number:			
If this production is commingted will. COMPLETION DATA					
	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
Designate Type of Completic	on $-(X)$	X	i		
	Date Compl. Ready to Prod.		P.B.T.D.		
Date Spudded 2–14–77	3–23–77	5473'	5460 '		
	<u></u>	l	Tubing Depth		
Elevations (DF, RKB, RT, GR, etc.)		5121'	53991		
6292' GR	Mesa Verde		Depth Casing Shoe		
Perforations			5471'		
See Form 9-33	0 (U.S.G.S.)		2471		
		CEMENTING RECORD	CARLOCALIT		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
13-3/4"	9-5/8"	217.40	190 sxs		
8-3/4"	7''	3121'	170 sxs		
6-1/4"	4-1/2"	2985'-5471'	245 sxs		
	2-3/8"	5399'			
V. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil an	nd must be equal to or exceed top allow-		
OIL WELL	able for this de	put of be jor just 24 mound,			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift,	etc.)		
			<u> </u>		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-MCF		
, total tront balling total		1	District /		
OAC WEST					
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
,	1				
6,929 Testing Method (pitot, back pr.)	3 hrs Tubing Pressure (shut-in)	Casing Pressure (Shut-in)	Choke Size		
	1	643 psig	3/4"		
Back Pressure	655 psig	1			
VI. CERTIFICATE OF COMPLIAN	ICE	11	TION COMMISSION		
		H AF	· · · · · · · · · · · · · · · · · · ·		
I hereby certify that the rules and	regulations of the Oil Conservation				
Commission have been complied	with and that the information given	II Orimine	H. Mondrick		
above is true and complete to the	ne best of my knowledge and belief.				
	\sim Ω	TITLE			
/		11	amaliance with mill e 1101		
	fun.	This form is to be filed in co	ompliance with RULE 1104.		
O Van	Lyan	This form is to be filed in co	able for a newly drilled or deepened ied by a tabulation of the deviation		
District Product	lyan	This form is to be filed in co	able for a newly drilled or deepened ied by a tabulation of the deviation		

(Title) April 6, 1977 (Date)

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