ſ	NO. OF COPIES RECEIVED			5					
ı	DISTRIBUTION								
	SANTA FE								
Ì	FILE			//					
	U.S.G.S.				٨	UTH			
	LAND OFFICE								
	TRANSPORTER	OIL	7						
I.		GAS	1						
	OPERATOR								
	PRORATION OF			İ					
	Operator								
	Aztec Oil & Gas Company								
	Address								
	P. O. Drawer 570, Farmingto								
	Reason(s) for filing (Check proper box)								
	New Well			C	ange i				
	Recompletion			Oi	1				
	Change in Ownership		Casinghe						
If change of ownership give name and address of previous owner									
	East					l-A			
	Location								

	SANTA FE /	A FE / NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE			Form C-104 Supersedes Old C-104 and C-1:				
	FILE / L	AND	Effective 1-1-65						
	U.\$.G.5.	ANSPORT OIL AND	NATURAL G	AS ·					
	LAND OFFICE								
	TRANSPORTER OIL /								
	GAS /	4							
	OPERATOR /	4							
1.	PRORATION OFFICE Operator								
	Aztec Oil & Gas Company								
	Address								
	P. O. Drawer 570, Farmington, New Mexico								
	eason(s) for filing (Check proper box) Other (Please explain)								
	New Well	Change in Transporter of:							
	Recompletion	Oil Dry Go	as 🔲						
	Change in Ownership	Casinghead Gas Conder	nsate						
	If change of ownership give name and address of previous owner								
II.	DESCRIPTION OF WELL AND			T.K 4.4					
		Lease Name Well No. Pool Name, Including F		Kind of Lease	Lease No.				
	East 1-A Blanco Mesa		/erde State, Federa		or Fee SF-077652				
	Location 14 7	00 50	700		No. of				
	Unit Letter M; 75	90 Feet From The South Lin	ne and	Feet From T	he West				
	Line of Section 14 To	wnship 31N Range	12W , NMPN	, San	Juan County				
	Line of Section 14 To	wnship 31N Range	12N , NMPA	i, Jan	Juan County				
IVI	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	ıs		_				
	Name of Authorized Transporter of Oil		Address (Give address	to which approv	ed copy of this form is to be sent)				
	Plateau, Inc.		P. O. Box 108	on, New Mexico					
	Name of Authorized Transporter of Car	singhead Gas 🔲 or Dry Gas 💢	Address (Give address	con, New Mexico ed copy of this form is to be sent)					
	Southern Union Gather	ring	P. O. Box 189	eld, New Mexico					
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When						
	give location of tanks.	1 1 1	No	·					
	If this production is commingled wi	th that from any other lease or pool,	give commingling orde	r number:					
	COMPLETION DATA								
	Designate Type of Completion (Y)		New Well Workover	Deepen	Plug Back Same Res'v. Diff. Res'v				
		Date Compl. Ready to Prod.	X Total Depth		P.B.T.D.				
	Date Spudded		-						
	1-29-77 Elevations (DF, RKB, RT, GR, etc.)	2-22-77 Name of Producing Formation	5463 1 Top Oil/Gas Pay		5406 Tubing Depth				
	6049' Mesa Verde		5068		53091				
	Perforations	I Mesa verde	3000		Depth Casing Shoe				
	See USGS form 9-330 5407'								
	TUBING, CASING, AND CEMENTING RECORD								
	HOLE SIZE CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
	13-3/4"	9-5/8"	2091		190 sxs				
	8-3/4"	7"	3062		170 sxs				
	6-1/4"	4-1/2"	2895 - 5407'		250 sxs				
		2-3/8"	5309		<u> </u>				
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volu	ime of load oil a	nd must be equal to or exceed top allow				
	OIL WELL	epth or be for full 24 hour Producing Method (Flor							
	Date First New Oil Run To Tanks	Date of Test	Producing Method (1-100), pump, gas ssy						
	Length of Test	Tubing Pressure	Casing Pressure		Choke Size				
	Feudin or Least				MAR 10 1977				
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.		TONE CON. COM.				
	•								
					DIST. 3				
	GAS WELL								
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	F	Gravity of Condensate				
	5,619	3 hrs							
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut	:-in)	Choke Size				
	Back Pressure	622 psig	681 psig		3/4"				
VI. CERTIFICATE OF COMPLIANCE		CE	OIL CONSERVATION		TION COMMISSION				
			APPROVED MAR 1 1 1877 19 Original Signed by A. E. M. addition						
	I hereby certify that the rules and	regulations of the Oil Conservation							
	Commission have been complied t	with and that the information given							
above is true and complete to the best of my knowledge and belief.									
	. / //		TITLE SUPERVISOR DIST. #3						
			This form is t	o be filed in compliance with RULE 1104.					
) a	If this is a request for allowable for a newly drilled or deepe: well, this form must be accompanied by a tabulation of the deviates taken on the well in accordance with RULE 111.							
	(Sign								
	District Production 1		All sections of this form must be filled out completely for allo						
	•	tle)	able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of conditions.						
	March 8, 1977								
	(De	ate)	II TOLL MAINE OF HUMBE	.,ports					

well name or number, or transporter, or other such change of conditi Separate Forms C-104 must be filed for each pool in multi-completed wells.