i	NO. OF COPIES RECEIVED	1			/							
	DISTRIBUTION SANTA FE (CONSERVATION COM	AISSION	Form C-104							
	FILE	REQUEST	FOR ALLOWABLE		Supersedes Old C-104 and C-11 Effective 1-1-65							
	AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS											
	LAND OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS											
	TRANSPORTER GAS											
	OPERATOR /											
ı.	PRORATION OFFICE Operator											
	Aztec Oil & Gas Company											
	Address P. O. Drawer 57	70, Farmington, New	Mexico									
	Reason(1) for filing (Check proper box) Other (Please explain)											
	New Well X Change in Transporter of:											
	Recompletion Oil Dry Gas Change in Ownership Casinghead Gas Condensate											
	Change in Ownership	Casinghead Gas Conde	ensute []									
	If change of ownership give name and address of previous owner											
Ħ.	DESCRIPTION OF WELL AND	LEASE										
	Lease Name	Well No. Pool Name, Including I		Kind of Lease State, Federal or F	Lease No.							
	Page Location	1-A Blanco Mesaverde State, Federal or										
	Unit Letter P; 960 Feet From The South Line and 1120 Feet From The East											
	Line of Section 18 Township 32N Range 10W , NMPM, San Juan County											
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)											
	Name of Authorized Transporter of Oil	1	Address (Give address to which approved copy of this form is to be sent)									
	Plateau, Inc. Name of Authorized Transporter of Cas	P. O. Box 108, Farmington, New Mexico Address (Give address to which approved copy of this form is to be sent)										
	Southern Union Gat		P. O. Box 1899, Bloomfield, New Mexico									
	If well produces oil or liquids, give location of tanks,	Unit Sec. Twp. Rgc.	Is gas actually connected? When									
	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,	, give commingling orde	r number:								
	Designate Type of Completic	Oil Well Gas Well	New Well Workover	Deepen Plu	ng Back Same Restv. Diff. Restv.							
		Date Compl. Ready to Prod.	X Total Depth	D;	3.T.D.							
	Date Spudded	6-14-77	57281		5713'							
	5-26-77 Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tul	bing Depth							
	6366' GR	Mesaverde	56771		5525'							
	Perforations 77' - 5284 C1			Dej	pth Casing Shoe							
	5344' - 5514 Po	int Lookout	D CEMENTING RECO	20	5726'							
		SACKS CEMENT										
	HOLE SIZE	CASING & TUBING SIZE	335 '		165 sxs							
	12-1/4" 8-3/4"	9-5/8"	3343'		200 sxs							
	6-1/4"	<u> </u>	3184' - 57	261	321 sxs							
	U-1/-4	4-1/2" 2-3/8"	5525'									
v.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)											
	Date First New Oil Run To Tanks Date of Test		Producing Method (Flow, pump, gas lij		i, eigi)							
	Length of Test	Tubing Pressure	Casing Pressure	(Ch	oke Size							
	Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Ga	s-MCF							
	Vordat Ligat partial Lag.											
	GAS WELL				N							
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	F Gro	avity of Condensate							
	10,973	3 hrs		-(2)	oke Size							
	Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (shut-in) 528 psig	Casing Pressure (Shu	"—zu j	3/411							
VΙ	CERTIFICATE OF COMPLIANCE		<u></u>	CONSERVATIO	N COMMISSION							
VI. UERTIFICATE OF CUMPLIANCE			OIL CONSERVATION COMMISSION									

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.

(Signature)

(Title)

(Date)

District Production Manager

June 23, 1977

APPROVED, 19								
BY	Original	Signed	Ъу	Ė.	િ.	Kendrick		
TITL	SUPEd	VIEOR 3	IST.		3 			

C-104 and C-110

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tasts taken on the well in accordance with RULE 111.

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.