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DISTRIBUTION	NEW MEXICO C	DIL CONSERVATION COMMISSION	Form C-104
SANTA FE /		EST FOR ALLOWABLE	Supersedes Old C-104 and C-1 Effective 1-1-65
U.S.G.S.	ALITHORIZATION TO	AND TRANSPORT OIL AND NATURAL	
LAND OFFICE	AUTHORIZATION TO	TRANSPORT OIL AND NATURAL	L GAS
TRANSPORTER OIL			
OPERATOR GAS /			
PRORATION OFFICE	Name (a. s.		
Operator			
Continental O	il Company		
P. O. Box 162	1, Burango, Colorado		
Reason(s) for filing (Check proper b	ροκ)	Other (Please explain)	
New Well Recompletion	Change in Transporter of:		
Change in Ownership	F	ory Gas Condensate	
T6 1 6			
If change of ownership give name and address of previous owner)		
I. DESCRIPTION OF WELL AN			
AXI Apache "N"		ol Name, Including Formation	Kind of Lease State, Federal or Fee
Location ALL APACHE "B"	8' 8	o. Blanco Pictured Cliffs	Federal Federal
Unit Letter P ; 10	090 Feet From The South	Line and 890 Feet Fro	om The
Line of Section 2 , 7	Township 25% Range	, NMPM,	io Arriba County
Name of Authorized Transporter of (Name of Authorized Transporter of (Southern Union	Casinghead Gas or Dry Gas	Address (Give address to which app	proved copy of this form is to be sent) proved copy of this form is to be sent)
If well produces oil or liquids,	Unit Sec. Twp. Rge	Pidelity Union Tower a. Is gas actually connected?	when Dalles, Texas
give location of tanks.		50	Awaiting Connection
If this production is commingled w. COMPLETION DATA	with that from any other lease or p	ool, give commingling order number:	
Designate Type of Complete	tion = (X)	, and the second	Plug Back Same Res'v. Diff. Res'v
Date Spudded 8/9/65	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Pool	8/19/65 Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth 3892
South Blanco	Pictured Cliffs	38051	38401
Perforations			Depth Casing Shoe
380508., 38	29 ¹ -38 ¹ , 3842 ¹ -52 ¹ TUBING, CASING.	AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE		SACKS CEMENT
12 1/4"	8 5/8 ^{ee}	2021	150 sacks
6 3/4" & 7 7/8"	4 1/20	3920	100 sacks
	2 3/8"	3840*	
. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must	be after recovery of total volume of load o	oil and must be equal to or exceed top allow
OIL WELL Date First New Oil Run To Tanks	Date of Test	is depth or be for full 24 hours) Producing Method (Flow, pump, gas	lift, etg.
			OFI.FIVED \
Length of Test	Tubing Pressure	Casing Pressure	CIP (LOUIS)
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas SEP 28 1965
			eon. co.
CAC WELL			OIL DIST. 3
GAS WELL	Length of Test	Bbls. Condensate/MMCF	Gravity of Compensate
Actual Prod. Test-MCF/D	1		Gravity of Condensate
2173	3 hours		
	Tubing Pressure	Casing Pressure	Choke Size
2173 Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure	\$15#	3/4"
2173 Testing Method (pitot, back pr.)	Tubing Pressure	S15# OIL CONSERV	/ATION COMMISSION
2173 Testing Method (pitot, back pr.) Back Pressure CERTIFICATE OF COMPLIAN	Tubing Pressure	OIL CONSERV	/ATION COMMISSION

TITLE Supervisor Dist. # 3

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 tests taken on the well in accordance with RULE 111.

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

Old C-104 and C-110

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

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.

ORIGINAL STONED BY:

(Signature)

Asst. District Manager

9/27/65

COOK W. SEATTH