		mar ann	/	
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SANTA FE		CONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-1.	
FILE /	KEQUES	AND		
U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS	
LAND OFFICE				
TRANSPORTER	_			
GAS /				
OPERATOR	-			
PRORATION OFFICE Operator				
Continental Oil Compa	ay			
P O. Box 1621. Buran	go. Golorado			
Reason(s) for filing (Check proper box	:)	Other (Please explain)		
Hew Well	Change in Transporter of: Oi' Dry			
Recompletion Thange in Ownership	·	ensate		
If change of ownership give name and address of previous owner				
DESCRIPTION OF WELL AND	LEASE LWell No. Pool '	dame, Including Formation	Kind of Lease	
Lease Name AXI Apache "K"		anco Mesaverde	State, Federal or Fee Federal	
Location.		1100	Test	
Unit Letter : 1	Feet From The North L	ine and 1190 Feet From	The Kast	
Line of Section 10 , To	ownship 261 Range	5W , NMPM, Rio	Arriba County	
DECLONATION OF TRANSPOR	TER OF OIL AND NATURAL (RAS		
Name of Authorized Transporter of O	or Condensate	Address (Give address to which appr	oved copy of this form is to be sent)	
Name of Authorized Transporter of Co	rsinghead Gas 🔃 or Dry Gas 🛣		roved copy of this form is to be sent)	
Southern Union Gas Co	mpany	Fidelity Union Tower Is gas actually connected?	Bldg, Ballas, Texas	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	ns gas actually connected?	Awaiting Connection	
If this production is commingled w	ith that from any other lease or poo	l, give commingling order number:		
COMPLETION DATA	Oi! Well Gas Well	New Well Workover Deepen	Flug Back Same Res'v. Diff. Res'	
Designate Type of Complet	ion – (X)	x		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	F.B.T.D.	
7-6-65	8-4-65	62501	6215'	
1 oct	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth 5480	
Blanco	Mesaverde	55421	Depth Casing Shoe	
Ferforations		-101 5636-361 5646-48	6250	
6117-29', 6070-74',	TURING CASING. A	3-18', 5626-36', 5644-48' ND CEMENTING RECORD	1	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
12 1/6"	8 5/8"	2131	150 sacks	
7 7/8"	4 1/2"	62501	350 sacks	
	2 3/8"	54801		
THE DATE AND DECLIEST	COD ALLOWARIE (Test must b	e after recovery of total volume of load o	il and must be equal to or exceed top allo	
TEST DATA AND REQUEST: OIL WELL	able for this	depth or or joi just 21 in- an-		
Date First New Oil Bun To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
			Choke Siza	
Length of Test	Tubing Pressure	Casing Pressure	OFI HIVE	
A - A 1 Fine d Liveir - Toot	Cil-Bbls.	Water - Bbls.	Gas-MCFKLULIY Li	
Actual Prod. During Test			CCD 0.2 +00F	
			SEP 2 7 1965	
GAS WELL			OIL CON. C	
Actual Frod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
2870	3 hours	Casina Pressure	Choke Size	
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	3/4"	
Back Pressure	240	OH CONSERV	VATION COMMISSION	
CERTIFICATE OF COMPLIA	NCE	SEP 2 7 196		
water to the second second second	d regulations of the Oil Conservati		, 19	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		en C 1	BY Original Signed Emery C. Arnold	
above is true and complete to t	he best of my knowledge and beli-	BY OLIMINAT OFFICE		
		TITLESupervisor Dist. # 3		
	CIONED Code	TITLESupervisor		
ORIGINAL SIGNED DY; H. D. HALEY				

(Signature)

District Manager (Title)

9-24-65 (Date)

JLE 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 tests 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 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.