		EST FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and
FILE /		AND	Effective 1-1-65
U,S.G.S.	. AUTHORIZATION TO	TRANSPORT OIL AND NATURAL	L GAS
RANSPORTER GAS			
OPERATOR / I. PRORATION OFFICE			
Continental Oil C	omp4ny		
P. O. Box 1621, D		Other (Please explain)	
Reason(s) for filing (Check prop	Change in Transporter of:	office (Freuze aspiration)	
isecompletion	on 🔲 D	ty Gas	
Thringe in Cwnership	Casinghead Gas C	ondensate	
If change of ownership give n and address of previous owne			
II. DESCRIPTION OF WELL	AND LEASE		Wind of Logge
Ledse Name		ol Mame, Including Formation	Kind of Lease State, Federal or Fee
AXI Apache "K"		Blanco Mesaverde	Tede:
Unit Letter <b>X</b> ;_	990 Feet From The South	feet Fr	om. The <b>West</b>
	. Township 969 Range	, NMPM,	Arriba Co
Line of Section 3	, Township <b>261</b> Range		2 ACT 104
Name of Authorized Transporter		Address (Give address to which ap	oproved copy of this form is to be sent) oproved copy of this form is to be sent)
Name of Authorized Transporter		<b>-</b>	
Southern Union 64 If well produces oil or liquids, tive location of tanks.	Graphy Sec. Twp. Rg	e. Is gas actually connected?	Bldg, Ballas, Texas
If this production is comming IV. COMPLETION DATA	led with that from any other lease or p	pool, give commingling order number:	
Designate Type of Com	pletion — (X)	ell New Well Workover Deeper.	Flug Back Same Res'v. Diff.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
7 <b>-20-65</b>	8-17-65 Name of Producing Formation	6150* Top Cil/Gas Pay	6115* Tubing Depth
Blanco	Mesaverde	5436¹	53401
Ferforations			Depth Casing Shoe
6010-20', 6002-08	1, 5436-441, 5463-681, 54	72-76', 5490-5510' , AND CEMENTING RECORD	61501
HOLE SIZE	CASING & TUBING SIZE		SACKS CEMENT
12 1/4 <sup>H</sup>	8 5/8"	220'	150 sacks
7 7/8"	4 1/2"	6150' 5340'	350 sacks
	2 3/8"	3340	
V. TEST DATA AND REQUE	CST FOR ALLOWABLE (Test mus	t be after recovery of total volume of load his depth or be for full 24 hours)	oil and must be equal to or exceed top
OIL WELL  Date First New Cil Bun To Tar		Producing Method (Flow, pump, go	is lift, etc.)
			Charles Circ
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas - MC
			/ Mron:
CAC WELL			SEP 27 1965
GAS WELL Actual Frod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Guide RON. CO
3265	1 hour	Caoing Process	Choke Size
Testing Method (pitot, back pr. Beck Pressure	Tubing Pressure	Casing Pressure	3/4"
VI. CERTIFICATE OF COMP		OIL CONSEF	RVATION COMMISSION
		APPROVED SEP 2 7 1965	

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.

Original Signed By BEN W. SMITH

(Signature)

Asst. District Manager

9-24-65

NMOCG(4)

C-110

Original Signed Emery C. Arnold

TITLE Supervisor Dist. # 3

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 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.