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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator **Antec Oil & Gas Company**

Address **Drews #570, Farmington, New Mexico**

Reason(s) for filing (Check proper box) ☒ New Well ☐ Recompletion ☐ Change in Ownership ☐ Change in Transporter of: Oil ☐ Gas ☐ Casinghead Gas ☐ Dry Gas ☐ Condensate ☐ Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name BARBER	Well No. 1	Pool Name, including Formation Basin Dakota	Kind of Lease Fee
Location I 1980 Feet From The South Line and 660 Feet From The East Line of Section 18 , Township 29N Range 13W , NMPM, San Juan County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Flatam Via New Mexico Tankers	Address (Give address to which approved copy of this form is to be sent) 1909 Bloomfield Blvd.
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Southern Union Gathering System	Address (Give address to which approved copy of this form is to be sent) 1907 Pacific, Dallas, Texas
If well produces oil or liquids, give location of tanks. I 18 29N 13W	Is gas actually connected? No When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

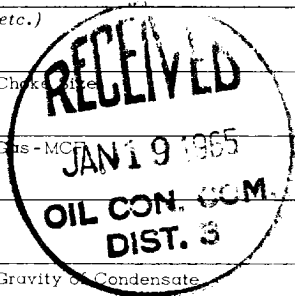
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 2-22-64	Date Compl. Ready to Prod. 3-24-64	Total Depth 5723	P.B.T.D. 5690					
Pool Basin Dakota	Name of Producing Formation Dakota	Top Oil/Gas Pay 5624	Tubing Depth 5722					
Perforations 5624-28; 5624-46			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	4-1/2" Casing	5722	
	2-3/8" Tubing	5546	

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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 lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.



GAS WELL

Actual Prod. Test-MCF/D 434 AGP	Length of Test 3 hour	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Multi-Point Back Press.	Tubing Pressure	Casing Pressure	Choke Size 3/4

VI. CERTIFICATE OF COMPLIANCE

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 **JOE C. SALMON**
(Signature)
District Superintendent
(Title)
1-13-65
(Date)

OIL CONSERVATION COMMISSION
APPROVED **JAN 19 1964 1965**, 19
BY **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.