	· • • • • • • • • • • • • • • • • • • •							
	NO. O" COPIES RECEIVED		1 2					
	DISTRIBUTION				NEW MEXICO			
	SANTA FE		1		REQU			
	FILE		1		NEGO			
	U.S.G.S.				AUTHORIZATION TO			
	LAND OFFICE				No money ro			
	TRANSPORTER	OIL	1					
		GAS	1					
	OPERATOR		1					
ı.	PRORATION OFFICE							
	Operator							
	Aztec Oil & Gas Company							
	Address							
	P. O. Dra	wer 5	Fa	rmington, New Mexico				

Reason(s) for filing (Check proper box)

If change of ownership give name and address of previous owner ____

New Well

Recompletion

Hale

Unit Letter

Line of Section 27

Name of Authorized Transporter of Oil

Location

Change in Ownership

 \mathbf{X}

011

2-A

Township 31N

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

II. DESCRIPTION OF WELL AND LEASE.
| Well No. | Pool Name, Including Formation

Casinghead Gas

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GA

Dry Gas

Blanco Mesa Verde

Range

; 1625 Feet From The North Line and 1020

or Condensate XX

				/		
ONSERVATION COMM FOR ALLOWABLE AND	ISSION	Sup	n C-104 ersedes Old ective 1-1-65	C-104 and C-110		
NSPORT OIL AND 1	NATURAL G	SAS				
						
Other (Please	explain)					
sate						
rmation erde	Kind of Lease State, Federal		079037	Lease No.		
and 1020	_ Feet From 1					
	San J			County		
S Address (Give address t	o which approx	and come of th	is form is to	ho gent)		
P. O. Box 108, Address (Give address t				•		
P. O. Box 990, Is gas actually connected	Farmingt	on, New				
No give commingling order	number:					
New Well Workover	Deepen	Plug Back	Same Res	v. Diff, Res'v.		
Total Depth 5790	, h	P.B.T.D.	710'			
Top Oil/Gas Pay 5261		Tubing Depth 5672'				
		Depth Casir	752 1			
CEMENTING RECOR		54	CKS CEMI	ENT		
320			280 sx			
3639			165 sx			
3451-5 5672			225 sx	s		
ter recovery of total volume oth or be for full 24 hours Producing Method (Flow)	,	qual to or ex	sceed top allow-		
Casing Pressure		Choke Size				
Water - Bbls.		Gas-NCF	3.4			
			The Contraction	لــــــــــــــــــــــــــــــــــــــ		
Bbls. Condensate/MMCF	-	Gravity of C	Condensate			
Casing Pressure (Shut-		Choke Size				
623 psig	ONSERVA		_3/4"_ MISSION			
APPROVED		7		19		
By Original S	igned t.					
TITLE		ংক				

	, =· •									
	Plateau, Inc.	singhead Gas 🗍 or Dry Gas $\overline{\overline{\chi}}\overline{\chi}$	P. O. Box 108,	Farmingt	on, New Mexico 87401					
	Name of Authorized Transporter of Cas	Address (Give address to which approved copy of this form is to be sent)								
	El Paso Natural Gas		P. O. Box 990, Farmington, New Mexico 87401 Is gas actually connected? When							
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	No No	i """						
	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA									
• • •		Oil Well Gas Well	New Well Workover	Deepen	Plug Back Same Res'v. Diff, Res'v.					
	Designate Type of Completic	on = (X)	X	i						
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
	9-28-76	12-17-76	5790'		5710'					
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
	6463' GR	Mesa Verde	5261'		5672'					
	Perforations				Depth Casing Shoe					
				5752'						
	TUBING, CASING, AND CEMENTING RECORD									
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SE	Т	SACKS CEMENT					
	13-3/4"	9-5/8"	320'		280 sxs					
	8-3/4"	7"	3639'		165 sxs					
	6-1/4"	4-1/2"	3451-5752'		225 sxs					
		2-3/8"	5672							
٠,	MESON DAMA AND DEGUEST E									
٧.	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 able for this depth or be for full 24 hours)									
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow,	pump, gas li	ft, etc.)					
					/ · · · · · · · · · · · · · · · · · · ·					
	Length of Test	Tubing Pressure	Casing Pressure		Choke Size					
					40.7					
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.		Gas-NCF					
					1 Coll Charles /					
	GAS WELL									
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF		Gravity of Condensate					
	1,649	3 hrs								
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-	in)	Choke Size					
	Back Pressure	625 psig	623 psig		3/4"					
VI.	CERTIFICATE OF COMPLIANO	OIL CONSERVATION COMMISSION APPROVED								
	I hereby certify that the rules and r Commission have been complied w									
	above is true and complete to the									
			TITLE							
					This form is to be filed in compliance with RULE 1104.					
ζ.,	6 / BA	If this is a request for allowable for a newly drilled or despened								
	(Signal District Droduction)	well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.								
	District Production 1	All sections of this form must be filled out completely for a able on new and recompleted wells.								
	January 7, 1977	Fill out only Sections I, II, III, and VI for changes of o well name or number, or transporter, or other such change of cond								
		-	Senarate Forms C-104 must be filed for each pool in multiply							