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| u.s.g.s. | | Ĺ <u>.</u> | | |
| LAND OFFICE | | <u> </u> | | |
| IRANSPORTER | OIL | 1 | | |
| | GAS | | | l |
| OPERATOR | | 1 | | |
| PRORATION OFFICE | | | | |
| | | | | |

January 6, 1977 (Tule)

(Date)

| DISTRIBUTION SANTA FE FILE | NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND | | Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 | |
|---|--|---|--|--|
| U.S.G.S. LAND OFFICE IRANSPORTER OIL / GAS / | AUTHORIZATION TO TRAN | NSPORT OIL AND NATURAL G | AS | |
| PRORATION OFFICE | | | | |
| Aztec Oil & Gas Cor | mpany | | | |
| Address | | 37401 | | |
| P. U. Drawer 5/U, Reason(s) for filing (Check proper box, | armingcom, non money | Other (Please explain) | : | |
| New Well | Change in Transporter of: | | | |
| Recompletion Change in Ownership | Oil Dry Gas Casinghead Gas Condens | = 1 | | |
| f change of ownership give name and address of previous owner | | | | |
| DESCRIPTION OF WELL AND | LEASE | ormation Kind of Leas | Lease No. | |
| Lease Name Hale | Well No. Pool Name, Including Fo | | lor Fee SF-079037 | |
| Location | 2160 Feet From The South Line | | rha East | |
| Unit Letter 'I ; | | | į. | |
| Line of Section 34 To | wnship 31N Range | 8W , NMPM, Sai | 1 Juan County | |
| DESIGNATION OF TRANSPOR | TER OF OIL AND NATURAL GAS | S Address (Give address to which appro | ved copy of this form is to be sent) | |
| Name of Authorized Transporter of Oil Plateau, Inc. | of Condensate (X) | P. O. Box 108, Farming | ton, New Mexico | |
| Name of Authorized Transporter of Ca | | Address (Give address to which appro | | |
| El Paso Natural Ga | us Company Unit Sec. Twp. Ege. | P. O. Box 990, Farmington, New Mexico Is gas actually connected? When | | |
| If well produces oil or liquids, give location of tanks. | | No | | |
| If this production is commingled wi | ith that from any other lease or pool, | | | |
| Designate Type of Completi | on - (X) | 1 1 | Plug Back Same Res'v. Diff. Res'v. | |
| Date Spudded | Date Compl. Ready to Prod. | X Total Depth | P.B.T.D. | |
| 11-18-76 | 12-19-76 | 5750' Top Oil/Gas Pay | 5715 Tubing Depth | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation Mesa Verde | 4986' 5417' | | |
| 6211 GR Perforations | Mesa verue | Depth Casing Shoe 5749 | | |
| | TUBING, CASING, AND | CEMENTING RECORD | 3749 | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | |
| 13-3/4" | 9-5/8" | 320' | 280 | |
| 8-3/4" | 7" | 3404 ' 3261 - 5749 | 165 245 | |
| 6-1/4" | 4-1/2'' 2-3/8'' | 5417' | | |
| TEST DATA AND REQUEST F | COP ALLOWARIE (Test must be a | ifter recovery of total volume of load oil | and must be equal to or exceed top allow | |
| OIL WELL Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas | ift, etc.) | |
| | | Coaling Pressure Choke(Size | | |
| Length of Test | Tubing Pressure | Cushing Prosons | | |
| Actual Prod. During Test | Oil-Bbls. | Water-Bbls. Gds-MCF | | |
| | | | | |
| GAS WELL | The state of the s | Bbls. Condensate/MMCF | Gravity of Condensate | |
| Actual Prod. Test-MCF/D | Length of Test 3 hrs | | | |
| 8,509 Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size | |
| Back Pressure | 659 psig. | 576 psig | 3/4" ATION COMMISSION | |
| CERTIFICATE OF COMPLIA | NCE | OIL CONSERV | | |
| I hereby certify that the rules and | i regulations of the Oil Conservation | gulations of the Oil Conservation th and that the information given the and that the information given the state of my knowledge and belief. BY ONIGINAL SIGNED BY N. E. MAXWELL, IR. | | |
| a i i i i haar samaliad | with and that the information given he best of my knowledge and belief. | | | |
| | | TITLE This form is to be filed in compliance with RULE 1104. | | |
| | | | | |
| | T. Marie | really a request for all | owable for a newly drilled or deepene panied by a tabulation of the deviation | |
| (51) | gnature | tests taken on the well in acc | ordence with HULE !!!. | |
| District Producti | on Manager | All sections of this form r | nust be filled out completely for allow | |

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

Fill out only Sections I, II, III, and VI 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.