4-NMOCC	1-E1	Pas	50	
NO. OF COPIES RECEIVED			4	
DISTRIBUTION				
SANTA FE		1		
FILE		1		
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL	<u> </u>		
TRANSFORTER	GAS	i		
OPERATOR		1		
PRORATION OF	L			

	DISTRIBUTION SANTA FE /		ONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65			
1	U.S.G.S.	AUTUODIZATION TO TOA	AND NSPORT OIL AND NATURAL G	A.C.			
}	LAND OFFICE	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL G	JA3			
ľ	OIL						
	TRANSPORTER GAS /		API	30-045-22955			
	OPERATOR /						
1.	PRORATION OFFICE						
-	Operator						
	Ladd Petroleum Corp	•					
	Address						
	Box 234, Farmington						
	Reason(s) for filing (Check proper box)		Other (Please explain)				
	New Well	Change in Transporter of:					
	Recompletion	Oil Dry Gas	声 [
	Change in Ownership	Casinghead Gas Conden	sate				
	If change of ownership give name						
	and address of previous owner						
11.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	ormation Kind of Lease	e Lease No.			
				uler Fee Fed NM 0206995			
	Aztec 35	3-📆 Harper Hill	Fruitland PC State, Federa	1 ed Nill 0200333			
	Location	Nouth	700	Mont			
	Unit Letter D : 790	Feet From The North Line	,	The West			
	25 7	vaship 30 N Range	13 W MARK, San	Juan County			
	Line of Section 35 Tow	mship 30 N Range	13 M Jall	Juan			
	DESCRIPTION OF TRANSPORT	CED OF OU AND NATURAL GA	c				
Ш.	DESIGNATION OF TRANSPORT	or Condensate	Address (Give address to which appro	wed copy of this form is to be sent)			
	Reme of Administra						
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas X	Address (Give address to which appro	oved copy of this form is to be sent)			
	El Paso Natural Gas	Unit Sec. Twp. P.ge.	Box 990, Farmington, Is gas actually connected?	ien 0/401			
	If well produces oil or liquids, give location of tanks.		No				
	<u> </u>						
	If this production is commingled wit	h that from any other lease or pool,	give comminging order number:				
17.	COMPLETION DATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.			
	Designate Type of Completion	on = (X)	X				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	6-6-78	7-10-78	1400'	1350'			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	5586' GR	Fruitland Pictured Clif	ffs 805 FR 1181 PC	None			
	Perforations	ons Depth Casing Shoe					
		TUBING, CASING, AND	CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	7-7/8"	5-1/2"	82'	35. sx			
	4-3/4"	2-7/8"	1375'	125 sx			
		<u> </u>					
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	l and must be equal to or exceed top allow-			
	OIL WELL Date First New Oil Run To Tanks	II. WELL					
	Date First New Oll Run 16 1 daks	Date of 1est					
		Tubing Pressure	Casing Pressure	Choke Size			
	Length of Test	Tubing 1 1555 at 5					
	Actual Prod. During Test	Oil - Bbls.	Water-Bbls.	Gas-MCF			
	Actual Prod. Barring 1951						
			<u> </u>				
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	141	18 hrs	0				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
	Back Pressure		241	1/4"			
VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION							
¥ J .							
I hereby certify that the rules and regulations of the Oil Conservation			APPROVED DEC 27 1978 . 19				
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		At 10 -11 PRANT CHAVET				
			BY				
			TITLE DEPUTY Oil & GAS INSPECTOR, DIST. #3 This form is to be filed in compliance with RULE 1104.				
			TO ALLE TO BE SERVED FOR BILD	realized or deepened			
			well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.				
Jim L. Jacoby (Signature)			tests taken on the well in acco	ordance with RULE 111.			

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 gool in multiply Agent (Title) 12-22-78 (Date)