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FILE		V_{-}	-
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL		
	GAS	/	
OPERATOR		ン	
PRORATION OF			

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

FILE /	-	AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL O	SAS
LAND OFFICE		·	
TRANSPORTER GAS			30-045-24.090
OPERATOR 2			
PRORATION OFFICE			
Operator			
Ladd Petroleum Corpora	tion		
Address		•	
830 Denver Club Bldg., Reason(s) for filing (Check proper box)	Denver, CO 80202	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry Gas		
Change in Ownership	Casinghead Gas Condens	ate	
f change of ownership give name			
nd address of previous owner			
ACCOUNTION OF WELL AND I	EACE		
DESCRIPTION OF WELL AND I	Well No. Pool Name, Including For	rmation Kind of Leas	e Lease No.
Aztec	2-E Basin Dakota	State, Federo	or Fee Federal
Location			•
Unit Letter G ; 16	00 Feet From The north Line	and 1600 Feet From	The <u>east</u>
35	2011	T ATY NILDY	County
Line of Section 35 Tow	mship 30N Range	14W , NMFM,	San Juan County
ስድፍነር አልተነሰል ስድ ተወልአፍወሰውን	TER OF OIL AND NATURAL GAS	S	
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro	ved copy of this form is to be sent)
Caribou - 4 Corners Oi		Box 457, Afto: , WY 8	33110
Name of Authorized Transporter of Cas	inghead Gas or Dry Gas 🔀	Address (Give address to which appro	oved copy of this form is to be sent;
El Paso Natural Gas	Unit Sec. Twp. Rge.	PO Box 990, Farmington	NM 87401
If well produces oil or liquids,	Unit Sec. Twp. Rge.		
give location of tanks.		NO	•
If this production is commingled with COMPLETION DATA	th that from any other lease or pool, a	give comminging order number.	
	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.
Designate Type of Completic		<u> </u>	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
2/11/80	3/30/80 Name of Producing Formation	6070 Top Oil/Gas Pay	5960 Tubing Depth
Elevations (DF, RKB, RT, GR, etc.,	'	5775	12" @ 5895'
5535 GR Perforations	Dakota	3/73	Depth Casing Shoe
Periorations	•		6065
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
124	8-5/8"	273	150 sx C1 "B" + 2% CaC1 200 sx "A" 50/50 Poz
7-7/8	4½"	6065	200 sx A 50/50 Poz 2nd stage 350 sx 65/35
			Poz + 320 sx 50/50 Poz
THE AND DECUEST F	OP ALLOWARIE (Test must be a	free recovery of total volume of load of	l and must be squal to or exceed top allow
TEST DATA AND REQUEST F	able for this de	pth or be for full 24 hours)	C 5 5 5 5 4 A
Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	life, etc.)
		1	Choke Size
Length of Test	Tubing Pressure	Casing Pressure	MAY 12-080
	Oli-Bhia.	Water-Bble.	Ggs-MCF
Actual Prod. During Test	Cit Baile	8	of-control /
		, ,	80 14 3500 V
GAS WELL			11
Actual Prod. Test-MCF/D	Length of Test		Gravity of Condensate DIST 47 API
1063	3 hrs	Casing Pressure (Shut-in)	Choke Size
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		3/4 pos
back pr	1540	1552 011 CONSERV	ATION COMMISSION
CERTIFICATE OF COMPLIAN	(CE		R t v
فالتعالم والهران الماليات	regulations of the Oil Conservation	APPROVED	19
A least a base complied	with and that the intermetion kives	lief. BY SUPERVISOR DISTRY (# 3	
above is true and complete to th	ie best of my knowledge and belief.		
1		TITLE	
111.1111	1 11	This form is to be filed in	n compliance with RULE 1104,
Wached L.	Verdling	If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviation is taken on the well in accordance with RULE 111.	
15ie	nature)		
Production E	nginee	All sections of this form i	must be filled out completely for allo-
4-9-8	ide)	able on new and recompleted	wells.
4-7-8	well name or number, or transporter, or other agent		orter, or other auch change of condition
(1	/ Wite /	Separate Forms C-104 m	ust be filed for each pool in multip
		completed wells.	