	_			
-	NO. OF COPIES RECE	13		
	DISTRIBUTION			
	SANTA FE			
	FILE			
	U.S.G.S.			
	LAND OFFICE	ICE		
	TRANSPORTER	OIL	1	
		GAS		
	OPERATOR		2	
I.	PRORATION OFFICE			
	Operator			

	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE I RANSPORTER OIL /	REQUEST F	ONSERVATION COMMISSION FOR ALLOWABLE AND NSPORT OIL AND NATURAL GA	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65			
1.	OPERATOR Z PRORATION OFFICE Operator						
	Robert W. Berry, Inc.						
		Change in Transporter of: Oil Dry Gas Casinghead Gas Condens					
	f change of ownership give name and address of previous owner	Exploration D	rilling Co				
II. I	DESCRIPTION OF WELL AND L	EASE	Table Promition	Kind of Lease			
	Lease Name Aztec Navajo A	_	ie, merading i binimizer	State, Federal or Fee Tribal			
-	Location			_			
	Unit Letter B; 600 Feet From The N Line and 1980 Feet From The E						
	Line of Section 25 Tow	mship 32N Range	18W , NMPM, S	an Juan County			
	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	s				
11. 	Name of Authorized Transporter of Oil The Permian Corpora Name of Authorized Transporter of Cas.	or Condensate 971/87) tion	Address (Give address to which approve PO Box 1183 Houston, Address (Give address to which approve	TX 77001			
	Gas insufficient to	warrant connection	Le are actually connected? When				
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When				
l	give location of tanks.	h that from any other lease or pool, [<u> </u>				
v.	COMPLETION DATA	Oil Well Gas Well		Plug Back Same Res'v. Diff. Res'v.			
	Designate Type of Completio		, tell policy and the second s	1 1 1 1			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	Perforations Depth Casing Shoe						
	TUBING, CASING, AND CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
		OR AT YOUR DIE (Tour must be a	ter recovery of total valume of load oil a	nd must be equal to or exceed top allow-			
V.	EST DATA AND REQUEST FOR ALLOWABLE (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) IL WELL Producing Method (Flow, pump, gas lift, etc.)						
	Date First New Oil Run To Tanks	Date of Test	Producing Method (F tow, pump, gas says				
	Length of Test	Tubing Pressure	Casing Pressure	Cheke Size			
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	GMBEC271979			
				OIL CON.			
	GAS WELL			DIST. 3			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity Condensation			
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size			
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION OFC 27 1979				
		regulations of the Oil Conservation with and that the information given	APPROVED Original Signed by A. R. Kendrick BY SUPERVISOR DISTRICT # 3 TITLE				
	above is true and complete to the	e best of my knowledge and belief.					
	/1./////	•					
	1/1/2/KW	/// Living		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened			
		natura)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.				

R.E. Kierig. Secretary
(Title)

(Date)

12/19/79

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.