NO. OF COPIES REC	18		
DISTRIBUTION		<u> </u>	
SANTA FE		<b>,</b>	_
FILE		1/	
U.S.G.S.		1	
LAND OFFICE			
TRANSPORTER	OIL	7	
- THE STATE OF THE R	GAS	7	
OPERATOR		,	
PRORATION OFFICE			
Operator			

## NEW MEXICO OIL CONSERVATION COMMISSION

FILE /	. REQUES	EST FOR ALLOWABLE Supersedes Old C-104 and (		
U.S.G.S.	AUTHORIZATION TO T	AND  Effective 1-1-65  THORIZATION TO TRANSPORT OIL AND NATURAL GAS		
LAND OFFICE		KANSI OKT OIL AND NATUR	AL GAS	
TRANSPORTER OIL /				
OPERATOR /				
PRORATION OFFICE				
Operator			_	
Aztec Oil and Gas	<b>5_</b>			
Reason(s) for filing (Check proper	ngton, New Mexico	Osh (2)		
New Well	Change in Transporter of:	Other (Please explain		
Recompletion	Oil Dry	Gas 🗍		
Change in Ownership	Casinghead Gas Cond	densate		
If change of ownership give name and address of previous owner _	e			
DESCRIPTION OF WELL AN	ID LEAGE			
Lease Name	Well No. Pool Name, Including	Formation   Kind of	Leage	
Decker Location	2 Blanco Me	1	Lease No.	
		daverue	Fee Fee	
Unit Letter A ; 1	090 Feet From The North L	ine and 850 Feet ?	rom The East	
Line of Section 26	Township 32N Range	3.00		
		12W , NMPM,	San Juan County	
DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL G	AS		
rease of Authorized Transporter of	Oil or Condensate XX	Address (Give address to which a	approved copy of this form is to be sent)	
New Mexico Tanker Name of Authorized Transporter of		Box 2151, Farmingto	on. New Meyico	
		Address (Give address to which o	on, New Mexico approved copy of this form is to be sent)	
Southern Union Ga	112.11	Box 398, Bloomfield	. New Mexico	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected?	When	
If this production is committed	mint at a c	l no	ļ	
COMPLETION DATA	with that from any other lease or pool	, give commingling order number:		
Designate Type of Comple	Oil Well Gas Well	New Well Workover Deeper	Plug Back   Same Res'v. Diff. Res'v	
	, Y		Diff. Heavy	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
8/3/67 Elevations (DF, RKB, RT, GR, esc.	8/26/67	7815	7800	
6600 G.	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
6603 Gr	Mesaverde	5395	7550	
5205 E)(O) E(u), a	6 Flore so start		Depth Casing Shoe	
7 17 7- 7-01	6, 5447-50, 5455-59, 5470	)-72, 5475-83 2 SPF	7815	
HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD		
13-1/4	9-5/8	DEPTH SET	SACKS CEMENT	
8-3/4	7	165! 5381!	150 sx	
6-1/4	4-1/2	7815	350 sx	
, , , , , , , , , , , , , , , , , , , ,	2-3/8	7550	600 sx	
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be c	ofter recovery of total values of land	oil and must be equal to or exceed top allow-	
OIL WELL  Date First New Oil Run To Tanks	able for this d	A Line of an Int Int SA WAREA		
- and the men on man to rungs	Dute of Teat	Producing Method (Flow, pump, ga	s lift, etc.)	
Length of Test	Tubing Pressure			
		Coming Pressure	Choke Class	
Actual Prod. During Test	Oil-Bble.	Water - Bbls.	/OF FIVE	
			MEGET VED	
		<u> </u>	1000	
GAS WELL			1 2 2 2 2 3 7 1	
Actual Prod. Teet-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condination De 2	
5035 Testing Method (pitos, back pr.)	3 hr		DIST 8	
	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Chor Size	
back pressure	1810	663	7/4"	
ERTIFICATE OF COMPLIA	NCE	OIL CONSER	VATION COMMISSION	
hereby cartifu that the	annihitas Automore		UCI 24 196/	
CINITION OF DEAD COMPLIAN	regulations of the Oil Conservation with and that the information given	n APPROVED		
bove is true and complete to the	se best of my knowledge and belief.	By Original Signed b	by Linery C. Timolo	
		18		
		TITLE SUPERVISOR DIST. #3		
(/m. 0 18		This form is to be filed in compliance with RULE 1104.		
ISI-	nature)	If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
1=-0	Superintendent			
77	itle)	All sections of this form must be filled out completely for all my		
Octo	per 23, 1967	able on new and recompleted wells.		
(E	ate)	Fill out only Sections I well name or number, or trans-	II, III, and VI for changes of owner, corter, or other such change of condition.	
		Separate Forms C-104 m	sust be filed for each pool in multiply	
	Walter .	i constituted wells. Pages	1×e	

FRO