

RECEIVED	5
SECTION	
DATE	1
TIME	1
OIL	1
GAS	
2	
OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes C-104 and C-110
Effective 1-1-66

Aztec Oil & Gas Company	
P. O. Drawer 570, Farmington, New Mexico	
Check proper box	Other (Please explain)
☐ Change in Transporter of:	
☐ Oil	☐ Dry Gas
☐ Casinghead Gas	☒ Condensate
If ownership give name and address of previous owner	

NAME OF WELL AND LEASE		Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Lawson		2	Basin Dakota	State, Federal or Fee	NM-010989
Location					
Unit Letter	3	1120	Feet From The North	Line and	1560
Line of Section		31	Township	32N	Range
				11W	NMPM, San Juan

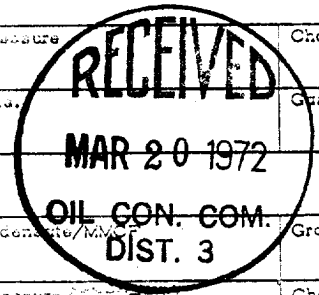
NAME OF AUTHORIZED TRANSPORTER OF OIL OR CONDENSATE		Address (Give address to which approved copy of this form is to be sent)				
Platteau		P. O. Box 108, Farmington, New Mexico				
NAME OF AUTHORIZED TRANSPORTER OF CASINGHEAD GAS OR DRY GAS		Address (Give address to which approved copy of this form is to be sent)				
If well produces oil or liquids, give volume of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When

If this production is commingled with that from any other lease or pool, give commingling order number:

DESIGNATE TYPE OF COMPLETION - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Other Res't.
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.S.T.D.				
Elevation (Top, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			Tubing Depth				
Performance					Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD									
PIPE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				

TESTING DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed allowable rate for this depth or be for full 24 hours)

DATE FIRST NEW OIL RUN TO TANKS	DATE OF TEST	Producing Method (Flow, pump, gas lift, etc.)	
LENGTH OF TEST	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
GAS ANALYSIS			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Gauge-in)	Casing Pressure (Gauge-in)	Choke Size



VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION MAR 20 1972	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED	13
District Superintendent		BY	Original Signed by Emery C. Arnold
March 20, 1972		TITLE	SUPERVISOR DIST. #3
(Date)		This form is to be filed in compliance with RULE 1104.	
		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.	
		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 owner, well name or number, or transporter, or other such change in condition. Separate forms C-104 must be filed for each pool in multiple	