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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

Form C-104  
Supersedes Old C-104 and C-1  
Effective 1-1-65

I. Operator  
FRANKLIN, ASTON & FAIR, LTD.  
Address  
P. O. Box 1090, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change In Transporter of:	CARGO MUST NOT BE 12/1/76 EXEMPTION TO B-4070 IS OBTAINED.	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>		
Change In Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		

If change of ownership give name  
and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL  
DESIGNATED BELOW. IF YOU DO NOT CONCUR  
NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Cone State	Well No. 1	Pool Name, Including Formation Tom-Tom San Andres	Kind of Lease State, Federal or Fee	Lease No. 1520-1
Location Unit Letter H ; 1980 Feet From The North Line and 660 Feet From The East Line of Section 2 Township 8S Range 31E , NMPLM, Chaves County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Crude Oil Purchasing Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 159 Artesia, New Mexico 88210					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 2	Twp. 8S	Rge. 31E	Is gas actually connected? TSTM	When

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 8-4-76	Date Compl. Ready to Prod. 8-25-76	Total Depth 4,500'	P.B.T.D. 4,160'					
Elevations (DF, RKB, RT, GR, etc.) 4,381' KB, 4,370.3' GR	Name of Producing Formation San Andres	Top Oil/Gas Pay 4,012'	Tubing Depth 4,000'					
Perforations 4,012'-4,017', 4,033'-4,038', 4,090'-4,094', 4,294'-4,296', 4,310'-4,319', 4,362'-4,374', 4,422'-4,428'		Depth Casing Shoe						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12 1/4"	CASING & TUBING SIZE 8 5/8"	DEPTH SET 1,565' KB		SACKS CEMENT 570 sx Lite, 200 sx				
7 7/8"	4 1/2"	4,500' KB		Class C circ. to surface 325 sx Class C				

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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)

Date First New Oil Run To Tanks 8-25-76	Date of Test 9-2-76	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure	Casing Pressure 200#	Choke Size
Actual Prod. During Test	Oil-Bbls. 85 BO	Water-Bbls. 30 BW	Gas-MCF TSTM

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

Caroleyn Jones  
(Signature)

Production Clerk  
(Title)

9-30-76  
(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 6 1976, 19

BY John W. Runyan

TITLE

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 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 multiple.

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JUN 16 1976  
CALIFORNIA COPIATION COMM.  
P.O. BOX 11, M.