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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
A M E N D E D

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

*confidential*

I. Operator  
FRANKLIN, ASTON & FAIR, INC.  
Address  
P.O. BOX 1090 ROSWELL, NEW MEXICO 88201  
Reason(s) for filing (Check proper box)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☒ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Aztec State	Well No. 1-Y	Pool Name, Including Formation Corbin Abo R-4995	Kind of Lease State, Federal or Fee State	Lease No. LC 272
Location Unit Letter C ; 660 Feet From The North Line and 2030 Feet From The West Line of Section 36 Township 17S Range 32E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input 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) Artesia, New Mexico 88210			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Continental Maljamar Plant	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 C	Sec. 36	Twp. 17S	Rge. 32E
Is gas actually connected?		When		
No		When right of way available		

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 <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded 1-6-75	Date Compl. Ready to Prod. 2-16-75		Total Depth 8706'		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 3978' KB	Name of Producing Formation Abo		Top Oil/Gas Pay 8406'		Tubing Depth 8448'			
Perforations 8406, 8410, 8415, 8422, 8429, 8436, 8438, 8454, 8456, 8468-1 jet shot					Depth Casing Shoe 8703'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
15	12 1/4		340		350 circ. surf.			
12	8-5/8		2975		1500			
7-7/8	5 1/2		8703		300			

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 2-14-75	Date of Test 2-17-75	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 700#	Casing Pressure 0	Choke Size 13/64"
Actual Prod. During Test	Oil-Bbls. 260	Water-Bbls. 0	Gas-MCF 286

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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.

*Erant M. Smith*  
(Signature)

Geologist

(Title)

2-28-75

(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

*Supervisor District 1*

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.