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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-110
Effective 1-1-65

Operator AZTEC OIL AND GAS COMPANY		
Address P. O. BOX 837 HOBBS, NEW MEXICO 88240		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.
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

II. DESCRIPTION OF WELL AND LEASE

Lease Name STATE DS	Well No. 5	Pool Name, including Formation SPENCER SAN ANDRES A-3922	Kind of Lease State, Federal or Fee STATE	Lease No. L 200
Location				
Unit Letter M	990	Feet From The SOUTH Line and 990	Feet From The WEST	
Line of Section 24	Township 17S	Range 36E	LEA	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"/> PERMIAN CORPORATION	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 3119 MIDLAND, TEXAS			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> SKELLY OIL COMPANY	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1650 TULSA, OKLAHOMA			
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 24	Twp. 17S	Rge. 36E
				Is gas actually connected? YES
				When 12-31-69

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'v.	Diff. Res'v.
Date Spudded 12-13-69	Date Compl. Ready to Prod.		Total Depth 5060		P.B.T.D. 5030			
Elevations (DF, RKB, RT, GR, etc.) 3806.4	Name of Producing Formation SAN ANDRES		Top Oil/Gas Pay 5006		Tubing Depth			
Perforations 5006-10					Depth Casing Shoe 5059			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12 1/4 7 7/8	CASING & TUBING SIZE 8 5/8 5 1/2		DEPTH SET 340 5059		SACKS CEMENT 220 300			

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)

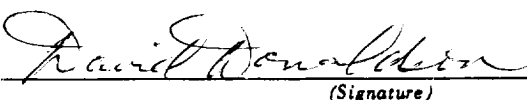
Date First New Oil Run To Tanks 12-31-69	Date of Test 12-31-69	Producing Method (Flow, pump, gas lift, etc.) SWAB	
Length of Test 10 HRS.	Tubing Pressure Open	Casing Pressure Packer	Choke Size Open
Actual Prod. During Test 136	Oil - Bbls. 96	Water - Bbls. 40	Gas - MCF TSTM

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.


(Signature)

DISTRICT GEOLOGIST

(Title)

JANUARY 2, 1970

(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

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 multiply completed wells.