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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

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

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
Pan American Petroleum Corp.
has changed its name to
AMOCO PROD. CO.

Operator PAN AMERICAN PETROLEUM CORPORATION	
Address P. O. Box 480, Farmington, New Mexico	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo Tribal "1"	Well No. 7	Pool Name, Including Formation Tecito Dome Pennsylvanian "D"	Kind of Lease State, Federal or Fee Federal
Location Unit Letter J ; 1980 Feet From The South Line and 1980 Feet From The East Line of Section 21 , Township 26-N Range 1E-W , NMPM, San Juan 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"/> Four Corners Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1588, Farmington, New Mexico		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, New Mexico		
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 20	Twp. Rge. 26-N 1E-W
			Is gas actually connected? When No

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 May 13, 1965	Date Compl. Ready to Prod. June 9, 1965		Total Depth 6226		P.B.T.D. 6219			
Pool Tecito Dome	Name of Producing Formation Pennsylvanian "D"		Top Oil/Gas Pay 6178		Tubing Depth 6214			
Perforations 6207-13 With 4 Shots per Foot.					Depth Casing Shoe 6226			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		92'		100			
11"	8-5/8"		1495'		500			
7-7/8"	4-1/2"		6226'		1000			
	2-3/8"		6214'					

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 June 8, 1965	Date of Test June 8, 1965	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 Hours	Tubing Pressure 1625	Casing Pressure 1875	Choke Size 16/64"
Actual Prod. During Test	Oil - Bbls. 366	Water - Bbls. -	Gas - MCF

GAS WELL

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

ORIGINAL SIGNED BY
L. R. Turner

(Signature)
Administrative Clerk
(Title)

June 11, 1965
(Date)

OIL CONSERVATION COMMISSION

APPROVED **JUN 14 1965**, 19
Original Signed By
BY **A. R. KENDRICK**
TITLE **PETROLEUM ENGINEER DIST. NO. 3**

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 Sections I, II, III, and VI only 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.