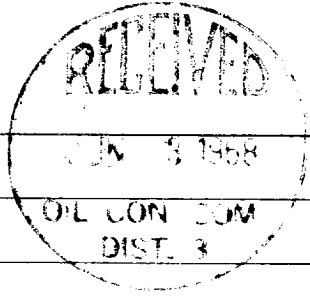


NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

NO. OF COPIES RECEIVED	1
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL / GAS /
OPERATOR	/
PRORATION OFFICE	/

Eff. 2-1-71,
Pan American Petro. Corp.
has changed its name to
AMOCO PROD. CO.



Pan American Petroleum Corporation

Address
501 Airport Drive, Farmington, New Mexico 87401

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 Navajo Tribal "U"	Well No. 4	Pool Name, Including Formation Tocito Dome Penn "D"	Kind of Lease State, Federal or Fee Federal	Lease No. 14-20-603-5034
Location Unit Letter B ; 660 Feet From The North Line and 1980 Feet From The East Line of Section 21 Township 26-N Range 18-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) Box 1588, Farmington, New Mexico 87401			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) Box 990, Farmington, New Mexico 87401			
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 20	Twp. 26N	Rge. 18W
Is gas actually connected?		When		
Yes		5-12-65		

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 March 15, 1965	Date Compl. Ready to Prod. April 17, 1965		Total Depth 6320'		P.B.T.D. 6285'			
Elevations (DF, RKB, RT, GR, etc.) 5683' RKB	Name of Producing Formation Pennsylvanian "D"		Top Oil/Gas Pay 6180'		Tubing Depth 6267'			
Perforations 6204-6209' with 4 SPF 6183-6194' with 4 SPF					Depth Casing Shoe 6320'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/4"	13-3/8"		93'		100			
11"	8-5/8"		1427'		800			
7-7/8"	4-1/2"		6320'		1000			

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 6-1-68	Date of Test 5-22-68	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24	Tubing Pressure 1045	Casing Pressure 1670	Choke Size 12/64"
Actual Prod. During Test 393 Bbls. Oil	Oil-Bbls. 393	Water-Bbls. None	Gas-MCF 290

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.

Area Engineer

(Title)

May 31, 1968

(Date)

OIL CONSERVATION COMMISSION

JUN 3 1968

APPROVED

BY **Original Signed by Emery C. Arnold**

SUPERVISOR DIST. #3

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.