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NO. OF COPIES RECEIVED  DISTRIBUTION  SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION  REQUEST FOR ALLOWABLE		Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
FILE /	AND		
LAND OFFICE	AUTHORIZATION TO TRAN  Eff. 2-1-71, Corp.  Pan American its name to changed its pane.	,	
TRANSPORTER GAS	merican Patro. to		\
OPERATOR / PRORATION OFFICE	Pan American 1to race to has changed 1to FROD. CO.		
PAN AMERICAN PETROLEUM			<u> </u>
P. O. Box 480. Farming	ton, New Mexico	Other (Please explair)	<u></u>
Reason(s) for filing (Check proper box)	Change in Transporter of:	Effective	
Recompletion Thange in Ownership	Oil Dry Gas  Casinghead Gas Condens	June 1, 1965	
If change of ownership give name and address of previous owner			
I. DESCRIPTION OF WELL AND I	LEASE Well No. Pool Name	e, Including Formation   F	(ind of Lease
Navajo Tribal. "U"		Dome Pennsylvanian "D"	State, Federal or Fee <b>Federal</b>
Unit Letter P 666	Feet From The South Line	and 660 Feet From The	East
Line of Section 16 , Tow	vnship <b>26-N</b> Range <b>18</b>	_w , <sub>NMPM</sub> , Sen Juan	? County
I. DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS	Address (Give address to which approved	l copy of this form is to be sent)
Name of Futherized Transporter of Cil Four Corners Pipeline	Company	P. O. Box 1588, Farming to Address (Give address to which approved	on. New Mexico
Mame of Authorized Transporter of Case El Paso Natural Gas Co	singheda dab	P. O. Box 990, Faring to	
If well projuces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When	May 12, 1965
give location of tanks.	P 16 26-N 18-W th that from any other lease or pool, g		may 12, 170)
V. COMPLETION DATA	Oil Well Gas Well		Plug Back   Same Res'v. Diff. Res'v.
Designate Type of Completion	on - (X) Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Pool	Name of Producing Formation		Depth Casing Shoe
Perforatio:15			
HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
V. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be af	fter recovery of total volume of load oil ar	nd must be equal to a exceed top allow
OIL WELL  Date First New Oil Run To Tanks	able for this de	pth or be for full 24 hours) Producing Method (Flow, pum; , gas lift,	etc. of The
Length of Test	Tubing Pressure	Casing Pressure	Cloke Size
		Water-Bbls.	MAY 25 1965
Actual Prod. During Test	Cil-Bbls.	Water Balan	CON. COM.
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 COMPLIAN	NCE	OIL CONSERVA	TION COMMISSION
I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED	
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 A. F. KUNDRICK	
		TITLE PETROLLOM ENGI	
PRIGINAL SIGNED BY B. R. TUKNER		This form is to be filed in co	able for a newly drilled or deepene
(Signature)		well, this form must be accompan	ied by a tabulation of the deviation

(Title)

(Date)

Administrative Clerk

May 24, 1965

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-:04 must be filed for each pool in multiply completed wells.