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LAND OFFICE	
TRANSPORTER	OIL 1 GAS
OPERATOR	2
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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

I. Operator Clinton Oil Co - Operating Division
 Address 217 North Water - Wichita, Kansas - 67202
 Reason(s) for filing (Check proper box) New Well Recompletion Change In Ownership
 Change In Transporter of: Oil Gas Casinghead Gas Dry Gas Condensate

If change of ownership give name and address of previous owner Pan American Petroleum Corp.

II. DESCRIPTION OF WELL AND LEASE
 Lease Name Old Trading Post Well No. 1 Pool Name, including Formation Undesignated Gallup Kind of Lease Federal Indian Lease No. _____
 Location P 790 Feet From The South Line and 790 Feet From The East Line
 Line of Section 10 Township 26N Range R-14W NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
 Name of Authorized Transporter of Oil or Condensate Plateau, Inc. Address (Give address to which approved copy of this form is to be sent) Box 108, Farmington, N. M.
 Name of Authorized Transporter of Casinghead Gas or Dry Gas 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 P Sec. 10 Twp. 26N Rge. 14W Is gas actually connected? _____ When _____

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 Gas Well New Well Workover Deepen Plug Back Same Restv. Diff. Restv.
 Date Spudded _____ Date Compl. Ready to Prod. _____ Total Depth _____ P.B.T.D. _____
 Elevations (DF, RKB, RT, GR, etc.) _____ Name of Producing Formation _____ Top Oil/Gas Pay _____ Tubing Depth _____
 Perforations _____ Depth Casing Shoe _____
 TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Choke Size
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Gravity of Condensate
			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.
U. Worachuk
 Production Clerk
 7-2-70
 (Date)

OIL CONSERVATION COMMISSION
 JUL 10 1970
 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