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ſ	NO. OF COPIES RECEIVED				
ļ-	DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COMMISSION	Form C -104	
ļ	SANTA FE /		FOR ALLOWABLE	Supersedes Old C-104 and C-110	
	FILE /	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	AND	Effective 1-1-65	
	U.S.G.S.	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL G	SAS A	
	LAND OFFICE	OFFICE			
	TRANSPORTER GAS 1	PER ENTROPES ESTANDED TO MAS CHARLED FROD FROD OU.	] o.	0.1.	
-	OPERATOR /	PER PORT TO THE PROPERTY OF THE PERSON OF TH			
	PRORATION OFFICE	has charged from co.			
•	Operator	<u> </u>			
	PAN AMERICAN PETROLEUM CORPORATION Address				
	501 Airport Drive, Farmington, New Mexico 87401				
Reason(s) for filing (Check proper box)  Other (Please and law)					
	New Well	Change in Transporter ct:			
	Recompletion	Oil Dry Ga	77		
	Change in Ownership	Casinghead Gas Conder	nsate		
	If change of ownership give name and address of previous owner				
II.	DESCRIPTION OF WELL AND I	LEASE	crmation (Evaluation	Lease No.	
	Lease Name	Well No. Pool Name, Including F		ler Fee Federal 14-20-603-	
	Navajo Tribal "N"	11 Tocito Dome Po	enn. "D"	5035	
	Unit Letter D; 560 Feet From The North Line and 1150 Feet From The West				
	Line of Section 17 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	cr Condensate	Address (Give address to water approx		
	Four Corners Pipeline		Box 1588, Farmington,	New Mexico 87401	
	Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (bive dates to water approved topy of this form is to be				
	El Paso Natural Gas Co.  Box 990, Farmington, New Mexico 87401  Unit Sec. Twp. Rge. Is gas actually connected? When				
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.  B 20 26N 18W	No No		
	If this production is commingled with that from any other lease or pool, give commingling order number				
IV.	COMPLETION DATA	Cil Well Gas Well	New Well Workover Deeper	Plug Back   Same Resty. Diff. Resty.	
	Designate Type of Completio	n = (X)	4 1		
	Date Spudded	Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.	
		1-31-70	6465'	6430'	
	12-13-69 Elevations (DF, RKB, RT, GR, etc.)	Name of Froducing Formation	Top Oil/Gas Pay	Tubing Depth	
		Penn. "D"	6176'	6395'	
	5834 GR, 5848 RKB	Fem. D		Depth Casing Shoe	
	6376-81 & 6385-90 x 4 SPF 6465'				
		TUBING, CASING, AN	D CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	17-1/4"	13-3/8"	110'	150 sacks	
	11"	8-5/8"	1508'	500 sacks 1300 sacks	
	7-7/8"	5-1/2"	6465 6395¹	1300 sacks	
V.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours)				
	OIL WELL  Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ift, etc.)	
		2-5-70	Pump		
	1-31-70 Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	24 hr.	220	220	Full	
	Actual Prod. During Test	Oii-Bbis.	Water-Bbis.	Gas-MCF	
	452 bb1.	95 bb1.	357 bb1.	271	
	GAS WELL			Complete of Condensate	
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
			Casing Pressure (Shut-in)	Choke Size	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Craind Licesma Consc. *** )	Chore size	
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
			APPROVEDFEB 1 1970		

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.

Constitut stores of	
(Signature)	
Area Engineer	
(Title)	
February 10, 1970	

BY Original Signed by Emery C. Arnold SUPERVISOR DIST, 200

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-134 must be filed for each pool in multiply completed wells.