HUMBER OF COP. .5 RECEIVED C. STRIBUTION BANTA FC FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS PRORATION OFFICE OPERATOR

NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe. New Mexico

(Form C-104) Revised 7/1/57

REQUEST FOR (OIX) - (GAS) ALLOWAPLE

New Well

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15:025 psia at 60° Fahrenheit.

ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS: American Petroleum Corporation E. H. Pipkin Well No. 10 in SW // NW (Company or Operator) B Sec. 1 727-N R11-W NMPM. Basin Dakota Production Sec. 1 Total Depth Sec. 1 Total Depth Sec. 1 Sec. 1 Total Depth Sec. 1 Feed Sec. 1 Total Depth Sec. 1 Total Depth Sec. 1 Feed Sec. 1 Total Depth Sec. 1 Feed Sec. 1 Total Depth Sec. 2 Feed Sec. 2
Company or Operator Sec. T. 27-N R NMPM, Basin Dakota Pour Letter T. 27-N R Name of Frod. Form. Dakota Pour Letter T. 27-N R T
County. Date Spudded February 23, 1961 bats Drilling Completed March 21, 19 Please indicate location: Top MA/Gas Pay 6296
County. Date Spudded February 23, 196 hats Drilling Completed March 21, 19 Please indicate location: Top MA/Gas Pay 6296 Name of Frod. Form. Dakota PRODUCING INTERVAL - Perforations 6 shots per foot 6301-63071, 5353-63571, Open Hole Casing Shoe 64,521 Depth Tubing 62851 L K J I Natural Prod. Test: bbls.cil, bbls water in hrs, min. Size M N O P load oil used): bbls.cil, bbls water in hrs, min. Size GAS WELL TEST - Natural Prod. Test: MCF/Day; Hours flowed Choke Size Method of Testing (pitot, back pressure, etc.):
Please indicate location: Top \$\$\frac{1}{2}\$ (Gas Pay 6296 Name of Fred. Form. Dakota PRODUCING INTERVAL - Perforations 6 shots per foot 6301-6307!, 6353-6357!. Depth
Please indicate location: Top \$\$\frac{1}{2}\$ (Gas Pay 6296 Name of Fred. Form. Dakota PRODUCING INTERVAL - Perforations 6 shots per foot 6301-6307!, 6353-6357!. Depth
Top SA/Gas Pay 6296 PRODUCING INTERVAL - Perforations 6 shots per foot 6301-6307', 5353-6357'. Depth Open Hole Depth Casing Shoe 6452' Depth Tubing 6285' OIL WELL TEST - Choin Matural Prod. Test: bbls.oil, bbls water in hrs, min. Size Choke load oil used): bbls.oil, cbls water in hrs, min. Size GAS WELL TEST - Section 1 (FOOTAGE) Method of Testing (pitot, back pressure, etc.):
Perforations 6 shots per foot 6301-6307', 5353-6357'. E F G H Open Hole
Choke Comparison of the continuous of the con
Open Hole Open H
OIL WELL TEST - Natural Prod. Test:
Natural Prod. Test: bbls.oil, bbls water in hrs, min. Size Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): bbls.oil, bbls water in hrs, min. Size GAS WELL TEST - Natural Prod. Test: MCF/Day; Hours flowed Choke Size (FOOTAGE) Method of Testing (pitot, back pressure, etc.):
Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used):
Choke N
load oil used):bbls.oil,bbls water inhrs,min. Size
Section 1 Natural Prod. Test: MCF/Day; Hours flowed Choke Size (FOOTAGE) Ming , Casing and Cementing Record Method of Testing (pitot, back pressure, etc.):
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(FOOTAGE) bing Casing and Gementing Record Method of Testing (pitot, back pressure, etc.):
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Test After Acid or Fracture Treatment: 6295 Mulf/Day; Hours flowed 100
7184 4 4.15.
5/8" 340' 275 Choke Size 2" Method of Testing: Pitot tube
Acid or Eracture Treatment (Give amounts of materials used, such as acid, water, oil, as sand): 38,400 gallens water 40,000 pounds of sand.
Cacing Tubing Date first new
71033
Gil Transporter Plateau, Inc.
Gas Transporter Southern Union Gas Company
marks: Completed March 21, 1961, as Basin Dakota Development Well. Potential test
95 MCF per day.
I hereby certify that the information given above is true and complete to the best of my knowledge.
, MAR Z 961 Pan American Petroleum Corporation
ALL SIGNED BY
OT CONCEDIATION COMMISSION By
(Signatur)
Original Signed Emery C. Arnold Title Administrative Clerk
Send Communications regarding well to: tle Supervisor Dest. # 3 Name Pan American Petroleum Corporation
AddressBox 480, Parmington, New Mexico