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FILE	1	V		
U.S.G.S.				
LAND OFFICE				
IRANSPORTER	OIL			
	GAS	<i> </i> /		
OPERATOR	1			
PRORATION OF				

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

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

	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS								
	LAND OFFICE OIL	-							
TRANSPORTER GAS / Pan American Petro. Corp.									
	OPERATOR ,	-	an Ameri	can Petro.	Corp.				
1.	PRORATION OFFICE	has changed its name to							
	operation.								
	PAN AMERICAN PETROLEUM CORPORATION Address								
	501 Airport Drive, Farmington, New Mexico 87401								
	Reason(s) for filing (Check proper box) Other (Please explain)								
	New Well Change in Transporter of:								
	Recompletion	011	Dry Go	as X					
	Change in Ownership	Casinghead Gas	Conde	nsate		····			
	If change of ownership give name								
	and address of previous owner								
II.	DESCRIPTION OF WELL AND								
	Fred Feasel "D"	Well No. Pool Name				of Lease		Lease No.	
	Location	l Fulch	er Kutz	Pictured C	Lifts state	e, rederal	or Fee Federal	SF 046563	
		90 Feet From The	South	ne and 165	in _		_{he} East		
	Unit Letter;;	Feet From The	DOUGHT LIF	ne and	Fe Fe	et From T	he	·	
	Line of Section 34 To	wnship 28-N	Range	10-W	, NMPM,	San J	uan	County	
III.	DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)						is to be sent	
	Kame of Administrator Pransporter of the Community of the						22 20p) 0, 1110 join	is to be sem,	
	Name of Authorized Transporter of Ca		Gas 📉	Address (Give	address to whi	ch approv	ed copy of this form	is to be sent)	
	Southern Union Gath		15				, New Mexico	87413	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp.	Rge.	Is gas actually	connected?	Whe		1070	
				Yes			August 2,	1970	
	If this production is commingled wi COMPLETION DATA	th that from any other lea	ase or pool,	give commingli	.ng order num	ber:			
	Designate Type of Completic	Oil Well	Gas Well	New Well W	orkover De	epen	Plug Back Same	Res'v. Diff. Res'v.	
	· · · · · · · · · · · · · · · · · · ·				· ·		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1	
	Date Spudded	Date Compl. Ready to Pro	oa.	Total Depth			P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Forma	Ition	Top Oil/Gas P	ду		Tubing Depth		
				1					
	Perforations						Depth Casing Shoe		
	TUBING, CASING, AND CEMENTING RECORD								
	HOLE SIZE	CASING & TUBIN		· · · · · · · · · · · · · · · · · · ·	EPTH SET		SACKS C	EMENT	
		<u> </u>		 			<u> </u>	· 	
v	TEST DATA AND DECLIEST F	OR ALLOWARIE (T	est must be a	feer recovery of t	otal valume of	lood oil a	nd must be squal to	ar areaed too allow	
٧.	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 allowable. WELL								
į	Date First New Cil Run To Tanks	Date of Test		Producing Meth	od (Flow, pum	p, gas lift	, etc.)	-	
		Tubing Pressure		Casing Pressur			Choke Size		
	Length of Test	I uping Pressure		Cdsing Pressur	•		Chore Size		
	Actual Prod. During Test	Oil-Bbls.		Water - Bbls.			Gas-MCF		
•									
r	GAS WELL Actual Prod. Test-MCF/D	Length of Test		Bbls. Condense	TI- ANCE		Gravity of Condense		
	Actual Prod. 1961-MCP/D	Langui of Test		BDIS. CORRENAC	ILEN MIMOL		Gravity of Condense	**************************************	
}	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-i	ln)	Casing Pressur	e (Shut-in)		Choke Size		
VI.	CERTIFICATE OF COMPLIANCE				OIL CONS	SERVA	TION COMMISSI	ON	
			APPROVED AUG 2 8 1970 19						
	Commission have been complied w	vith and that the informs	ulations of the Oil Conservation hand that the information given		Original Signed by A. R. Kendrick				
1	bove is true and complete to the best of my knowledge and belief.			BY					
	ORIGINAL SIGNED BY L. R. Turner (Signature)			TITLE PETROLEUM ENGINEER DIST. NO. 9					
				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 to the section of the section well.					
-									
-	Administrative Assistant (Title)								
	•	August 27, 1970 (Date)			able 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				
-									
				Separate completed w		04 must	be filed for each	pool in multiply	
				., Jompiolog W	J 1				