	- -		
NO. OF COPIES RECEIVED	_		
DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSI	ON Form C-104
SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65
FILE / U		AND	
U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NAT	URAL GAS
LAND OFFICE	Pan American its its of the charge of paon.	Ju O a.	
TRANSPORTER OIL	Pan American Patro. Co. has chenged PAOD. Co.	to	
GAS /	American its man.		
OPERATOR /	Pan changer PROD.		
PRORATION OFFICE Operator	Pan America its move.		
PAN AMERICAN	PETROLEUM CORPORATION		
_	rive, Farmington, New Me	xico 87401	
Reason(s) for filing (Check proper bo	x)	Other (Please exp	lain)
New Well	Change in Transporter of:		
Recompletion	O11 Dry (Gas X	
Change in Ownership	Casinghead Gas Cond	en s ate	
If change of ownership give name and address of previous owner			
I. DESCRIPTION OF WELL AND	Vell No. Pool Name, Including	Formation Kir	d of Lease No.
Kutz Deep Gas Cori "D"	1 Basin Dakota	3 Sta	te, Federal or Fee Federal SF 077383
Unit Letter A ; 79	Feet From The North	ine andF	eet From The East
Line of Section 27 T	ownship 28N Range	10- V , NMPM,	San Juan County
I. DESIGNATION OF TRANSPOL Name of Authorized Transporter of O	:l or Condensate	Address (Give address to w	tich approved copy of this form is to be sent)
Name of Authorized Transporter of C Southern Union Gathe	ering Company		ich approved copy of this form is to be sent) ield, New Mexico 87413 When
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Age.	Yes	August2, 1970
If this production is commingled w	with that from any other lease or pool	, give commingling order nu	nber:
Designate Type of Complet	ion - (X) Gas Well	New Well Workover I	Peepen Plug Back Same Restv. Diff. Restv.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Flevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations		<u>i</u>	Depth Casing Shoe
	TUBING CASING A	ND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TICLE SIZE			
	FOR ALLOWABLE (Test must be able for this	after recovery of total volume (of load oil and must be equal to or exceed top allow
OIL WELL	FOR ALLOWABLE (Test must be able for this	after recovery of total volume (depth or be for full 24 hours) Producing Method (Flow, pi	
	able for this	depth or be for full 24 hours)	
ONL WELL Date First New Oil Run To Tanks	able for this	depth or be for full 24 hours)	mp, gas lift, etc.) AUG 28 1000
OIL WELL	able for this Date of Test	depth or be for full 24 hours) Producing Method (Flow, pr	mp, gas lift, etc.) AUG 28 1009
Dute First New Cil Run To Tanks	able for this Date of Test	depth or be for full 24 hours) Producing Method (Flow, pr	mp, gas lift, etc.) AUG 28
OIL WELL Date First New Oil Run To Tanks Length of Test	able for this Date of Test Tubing Pressure	Producing Method (Flow, pi Casing Pressure	mp, gas lift, etc.) AUG 28 1000 Choke Sze OIL CON. Co.
OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL	able for this Date of Test Tubing Pressure Oil-Bbls.	Producing Method (Flow, pi Casing Pressure Water-Bbls.	Choke Size OIL CON. C. Gas-MCF DIST.
OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test	able for this Date of Test Tubing Pressure	Producing Method (Flow, pi Casing Pressure	mp, gas lift, etc.) AUG 28 1000 Choke Sze OIL CON. Co.
OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL	able for this Date of Test Tubing Pressure Oil-Bbls.	Producing Method (Flow, pi Casing Pressure Water-Bbls.	Choke Size OIL CON. C. OIL CON

VI. CERTIFICATE OF COMPLIANCE

II

Ш

ĮV

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.

ORIGHIAL SIG	प्राकृत् जिल्ला हुन
--------------	------------------------

(Signature) Administrative Assistant

(Title)

August 27, 1970

(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 2 8 1970

By Original Signed by Emery C. Arnold

TITLE SUPERVISOR DIST. #5

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 completed wells.