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	NO. OF COPIES RECEIVED	_			
	DISTRIBUTION /	NEW MEXICO OIL CONSERVATION COMMISSI		Form C-104	
	FILE /	REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-11 Effective 1-1-65	
	U.S.G.S.	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		AS ASTR	
U.S.G.S.  LAND OFFICE  IRANSPORTER OIL    GAS /  OPERATOR  U.S.G.S.  AUTHORIZATION TO TRANSPORT OIL A  Eff. 2-1-71, Corp.  Par American Petro. To name to  Operator  O			MA	~ GFI HIVEN	
	TRANSPORTER OIL	Eff. Petro. Co.	.O	/ KLULIYED /	
	GAS /	Pan American Petro. Co. has changed its name to		055 71007	
_	PRORATION OFFICE	Pan American its moon has changed PROD. CO.		SEP <b>5</b> 1967	
I.	Operator Operator	AMOCO		OIL CON. COM.	
	PAN AMERICAN PETROLEUM CORPORATION DIST. 3				
	Address				
		Farmington, New Mexico			
	Reason(s) for filing (Check proper box	Change in Transporter of:	Other (Please explain)		
	Recompletion	Oil Dry Ga	· .		
	Change in Ownership		nsate 🔼		
	If change of ownership give name and address of previous owner	Benson-Montin-Greer Br	illing Corporation, Petr	oleum Center Building,	
	(a) Ka	Farmington, New Mexico			
II.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fe	ormation   Kind of Lease	t.egse No.	
	Fullerton	1 Basin Bak	1	or Fee Federal SF 077978	
	Location				
	Unit Letter A ; 79	O Feet From The North Lin	e and 790 Feet From T	he last	
	Line of Section 34 Tov	vnship <b>28-M</b> Range	13-W , NMPM, 8	en Juan County	
	DEGRAMATION OF TRANSPORT				
HII.	Name of Authorized Transporter of Oil	FER OF OIL AND NATURAL GA	Address (Give address to which approv	ed copy of this form is to be sent)	
	Plateau, Inc.			,	
	Name of Authorized Transporter of Casinghead Gas or Dry Gas		P. O. Box 108, Farmington, New Mexico  Address (Give address to which approved copy of this form is to be sent)		
	El Paso Natural Gas	Company	P. O. Box 990, Farmingt		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When	n	
	give location of tanks.	A 34 28M 13W	163		
187		th that from any other lease or pool,	give commingling order number:		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v.   Diff. Res'v.	
	Designate Type of Completic	on = (X)			
	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	I	<u> </u>	Depth Casing Shoe	
		TUBING, CASING, AND	CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
			1		
v.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil a	nd must be equal to or exceed top allow-	
• •	OIL WELL able 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	Choke Size	
	Edity in dr. 1951				
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF	
				· <u></u>	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	TOTAL PROPERTY OF A			or commensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVA	TION, COMMISSION	
			CE / 1201		
	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.		Original Signed by Emery C. Arnold		
			TITLE SUPERVISOR DIST. #8		
			This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepened		
	XXX X	11/2		well, this form must be accompanied by a tabulation of the deviation	
		All sture)	If this is a request for allow well, this form must be accompan	ied by a tabulation of the deviation	
	(Signe	ature)	If this is a request for allow well, this form must be accompan tests taken on the well in accord	ied by a tabulation of the deviation lance with RULE 111.	
		ne Clerk	If this is a request for allow well, this form must be accompan tests taken on the well in accord	ied by a tabulation of the deviation lance with RULE 111. t be filled out completely for allow-	
	Administration (Time August 31,	ne Clerk	If this is a request for allow well, this form must be accompantesta taken on the well in accordant sections of this form must able on new and recompleted well.  Fill out only Sections I. II.	ied by a tabulation of the deviation lance with RULE 111.  t be filled out completely for allow- ils.  III. and VI for changes of owner,	
	Administration (Time August 31,	ne Clark	If this is a request for allow well, this form must be accompantests taken on the well in accordant accordant accordant tests taken on the well in accordant	ied by a tabulation of the deviation lance with RULE 111.  t be filled out completely for allow-	