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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/>
OPERATOR	
PRORATION OFFICE	

NEW ME

S. F. 100-100-100-100

Form C-104

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

AUTHORIZATION

OIL AND GAS

Eff. 2-1-71,
Pan American Petro. Corp.
has changed its name to
AMOCO PROD. CO.

Operator PAN AMERICAN PETROLEUM CORPORATION		
Address Security Life Building Denver, Colorado		
Reason(s) for filing (Check proper box)		
New Well <input type="checkbox"/>	Change in Transporter of <input type="checkbox"/>	Lease Name Change
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Previously:
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	State of N.M. Gas Unit A #1

If change of ownership, give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State Gas Com A	Lease No. 1	Blanco Mesaverde	State, Federal or Fee State
Location			
Unit Letter A	990	Feet From The North	990
Line of Section 16	Township 29N	9W	San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Box 108, Farmington, New Mexico
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Box 990, Farmington, New Mexico
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Yes Not Available
A 16 29N 9W	Yes

If this production is commingled with that from any other lease, give lease number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod.	Test Depth	P.S.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top of Gas Pay	Tubing Depth		
Perforations	Depth Casing Shoe				
TUBING, CASING, AND CEMENTING DATA					
HOLE SIZE	CASING & TUBING SIZE	DEPTH	SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of test volume of load oil and must be equal to or exceed top allowable for the depth or be for 100 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
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

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OIL CON. COM.

DIST. 3

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

OIL CONSERVATION COMMISSION

APPROVED OCT 11 1965, 19

BY Original Signed Emory C. Arnold

Supervisor Dist. # 3

This form is to be filed in compliance with RULE 1104.

A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation from the well in accordance with RULE 111.

This form must be filled out completely for allowable for completed 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.



Administrative Assistant

(Title)

September 30, 1965

(Date)