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NEW MEXICO OIL CONSERVATION COMMISSION

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

Santa Fe, New Mexico

REQUEST FOR ~~WELL~~ - (GAS) ALLOWABLE

New Well
~~RECOMPLETION~~

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.

Farmington, New Mexico October 14, 1964
(Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

PAN AMERICAN PETROLEUM CORPORATION Gallegos Canyon
(Company or Operator) No. 181 Unit, Well No. 1, in SE $\frac{1}{4}$ NW $\frac{1}{4}$,
(Lease)

F 34, T. -29-N, R. -12-W, NMPM, Basin Dakota Pool
Unit Letter

San Juan

Please indicate location:

D	C	B	A
E	F X	G	H
L	K	J	I
M	N	O	P

1650' FWL and 1650' FNL
(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>8-5/8"</u>	<u>348</u>	<u>225</u>
<u>4-1/2"</u>	<u>6020</u>	<u>1500</u>
<u>2-3/8"</u>	<u>5801</u>	

County. Date Spudded 9-21-64 Date Drilling Completed 10-2-64
Elevation 5353 (RDB) Total Depth 5990 PBDT 5955

Top Oil/Gas Pay 5796 Name of Prod. Form. Dakota

PRODUCING INTERVAL - 5930-5940 with 4 shots per foot
5864-5890 with 2 shots per foot

Perforations 5796-5808 with 4 shots per foot

Open Hole None Depth 5990 Depth 5782
Casing Shoe Tubing

OIL WELL 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 _____

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: 8200 MCF/Day; Hours flowed 3

Choke Size 3/4" Method of Testing: Pitot Tube

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 96,389 gallons water and 90,000 pounds sand

Casing 1725 Tubing 650 Date first new Shut-In
Press. oil run to tanks

Oil Transporter Platoon, Inc.

Gas Transporter El Paso Natural Gas Company

Remarks: Well completed October 12, 1964 as Basin Dakota Field Development well. Copy of Deviation Survey attached.

I hereby certify that the information given above is true and complete to the best of my knowledge.
Approved OCT 16 1964, 19____ PAN AMERICAN PETROLEUM CORPORATION
ORIGINAL SIGNED (Company or Operator)

L. R. Turner

By: _____ (Signature)

OIL CONSERVATION COMMISSION

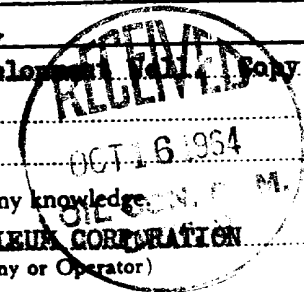
By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 2

Title Administrative Clerk
Send Communications regarding well to:

Name L. O. Spear, Jr.

Address Box 480, Farmington, New Mexico



C O P Y

TABULATION OF DEVIATION TESTS
PAN AMERICAN PETROLEUM CORPORATION
GALLEGOS CANYON NO. 181 UNIT NO. 1

<u>DEPTH</u>	<u>DEVIATION</u>
360'	1/2°
808'	3/4°
1212'	3/4°
1679'	1 3/4°
2270'	3/4°
2760'	3/4°
3290'	1/4°
4474'	1 1/2°
5273'	1/4°
5650'	1/2°
5905'	

A F F I D A V I T

THIS IS TO CERTIFY that to the best of my knowledge the above tabulation details the deviation test taken on PAN AMERICAN PETROLEUM CORPORATION'S Gallegos Canyon No. 181 Unit No. 1, Basin Dakota Field, located in the SE/4 NW/4 of Section 34, T-29-N, R-12-W, San Juan County, New Mexico.

Signed F. H. Hollingsworth
Petroleum Engineer

THE STATE OF NEW MEXICO)
COUNTY OF SAN JUAN) SS.

BEFORE ME, the undersigned authority, on this day personally appeared F. H. Hollingsworth known to me to be Petroleum Engineer for Pan American Petroleum Corporation and to be the person whose name is subscribed to the above statement, who, being by me duly sworn on oath, states that he has knowledge of the facts stated herein and that said statement is true and correct.

SUBSCRIBED AND SWORN TO before me, a Notary Public in and for said County and State this 14th day of October, 1964.

S. K. Kutz
Notary Public

My Commission Expires February 27, 1965.

