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# NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

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

## REQUEST FOR (OIL) - (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 QUADRUPPLICATE 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

August 14, 1964

(Place)

(Date)

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

**PAN AMERICAN PETR. CORP. Gallegos Canyon # 161 Unit**, Well No. 1, in SW  $\frac{1}{4}$  SE  $\frac{1}{4}$ ,  
(Company or Operator) (Lease)

0 Sec. 23, T-29-N, R-13-W, NMPM., Basin Dakota Pool  
Unit Letter

San Juan County

Date Spudded 6-20-64 Date Drilling Completed 6-28-64

Please indicate location:

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

Elevation 5660 (RDB) Total Depth 6238 PBTD 6201

Top Oil/Gas Pay 6036 Name of Prod. Form. Dakota

PRODUCING INTERVAL - 6126-36, 6154-64 with 2 shots per foot.  
6042-47 with 4 shots per foot.  
Perforations 6058-68 with 2 shots per foot.

Open Hole None Depth 6238 Casing Shoe 6238 Depth 6075 Tubing

### OIL WELL TEST -

Natural Prod. Test: \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Choke 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. Choke 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: 5500 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): 73,600 GAL water, 50,000 LB sand, 15,000 LB Resin.

Casing Tubing Date first new  
Press. 1000 Press. 450 oil run to tanks Shut-in

Oil Transporter Platoon, Inc.

Gas Transporter El Paso Natural Gas Company

Remarks: Well completed 8-6-64 as Basin Dakota Field Development Well.

Copies of Deviation Survey are attached.

I hereby certify that the information given above is true and complete to the best of my knowledge. DIST. 3

Approved AUG 20 1964, 19\_\_\_\_

Pan American Petroleum Corporation

(Original Signer Operator)

G. L. HAMILTON

By: \_\_\_\_\_ (Signature)

OIL CONSERVATION COMMISSION

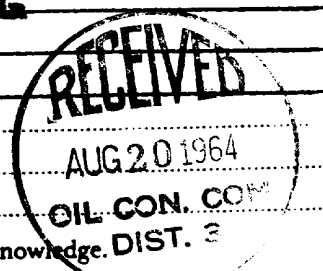
By: Original Signed Emery C. Arnold

Title: District Services Supervisor  
Send Communications regarding well to:

Title Supervisor Dist. # 3

Name: L. O. Spear, Jr.

Address Farmington, New Mexico - P.O. Box 480



# TABULATION OF DEVIATION TESTS

PAN AMERICAN PETROLEUM CORPORATION  
GALLEGOS CANYON NO. 161 UNIT #1

DEPTH	DEVIATION
353'	1/2°
760'	3/4°
1160'	1/2°
1560'	3/4°
1960'	1 1/4°
2038'	1 1/2°
2490'	1 1/4°
2840'	1
3090'	1
3497'	3/4°
3890'	3/4°
4065'	1 1/4°
4903'	1/4°
4980'	3/4°
5360'	3/4°
5670'	1/4°
6096'	1 1/2°
6235'	3/4°

## 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. 161 Unit #1, located in the SW/4 SE/4 Section 23, T-29-N, R-13-W, Basin Dakota Field, San Juan County, New Mexico.

Signed F. H. Hallingworth  
Petroleum Engineer

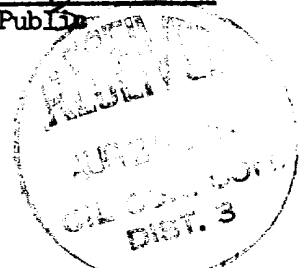
THE STATE OF NEW MEXICO )  
COUNTY OF SAN JUAN ) SS.

BEFORE ME, the undersigned authority, on this day personally appeared F. H. Hallingworth 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 August, 1964.

S. K. Dietz  
Notary Public

My Commission Expires February 27, 1965.



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