

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO

Form C-110  
Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Pan American Petroleum Corporation Lease USG Section 19

Well No. 19 Unit Letter F S 19 T 29N R 16W Pool Hogback Dakota

County San Juan Kind of Lease (State, Fed. or Patented) Federal

If well produces oil or condensate, give location of tanks: Unit J S 19 T 29N R 16W

Authorized Transporter of Oil or Condensate Four Corners Pipeline Company

Address P. O. Box 1095, Compton, California  
(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas \_\_\_\_\_

Address \_\_\_\_\_  
(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

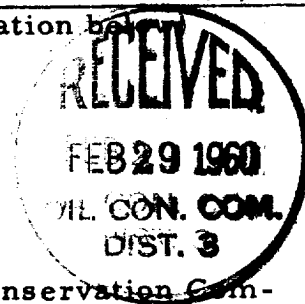
Reasons for Filing: (Please check proper box) New Well (X)

Change in Transporter of (Check One): Oil ( ) Dry Gas ( ) C'head ( ) Condensate ( )

Change in Ownership ( ) Other ( )

Remarks: \_\_\_\_\_ (Give explanation below)

Completed as Flowing Oil Well Hogback-Dakota Field February 26, 1960.



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 29th day of February 19 60

Original Signed By  
By G. L. HAMILTON

Approved FEB 29 1960 19 60

Title Area Clerk

OIL CONSERVATION COMMISSION

Company Pan American Petroleum Corporation

By Original Signed Emory C. Arnold

Address P. O. Box 487

Title Supervisor Dist. # 3

Farmington, New Mexico

Attn: L. O. Speer, Jr.

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

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

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

New Well

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 February 29, 1960  
(Place) (Date)

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

Pan American Petroleum Corporation Section 19 USC Well No. 19, in SE  $\frac{1}{4}$  NW  $\frac{1}{4}$ ,  
(Company or Operator) (Lease)  
F Sec. 19, T. 29N, R. 16W, NMPM., Hogback Dakota Pool  
Unit Letter

San Juan

County San Juan Date Spudded 2-17-60 Date Drilling Completed February 24, 1960

Please indicate location:

Elevation GL 5250 Total Depth 810 PBD

Top Oil/~~max~~ Pay 808 Name of Prod. Form. Dakota

PRODUCING INTERVAL -

Perforations None

Open Hole 787-810 Depth 810 Casing Shoe 787 Depth Tubing 774

OIL WELL TEST -

Natural Prod. Test: 74 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size open  
(Flowing)

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of 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: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_

Choke Size \_\_\_\_\_ Method of Testing: \_\_\_\_\_

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): None

Casing \_\_\_\_\_ Tubing \_\_\_\_\_ Date first new \_\_\_\_\_  
Press. \_\_\_\_\_ Press. \_\_\_\_\_ oil run to tanks February 24, 1960

Oil Transporter Four Corners Pipeline Company

Gas Transporter None

Remarks: Completed as flowing oil well Hogback Dakota Field February 26, 1960. Potential test February 26, 1960 flowed 74 BOPD.

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

Approved FEB 29 1960, 1960

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

Pan American Petroleum Corporation  
Original Signed G. L. HAMILTON  
By: \_\_\_\_\_ (Signature)

Title Area Clerk  
Send Communications regarding well to:

Name Pan American Petroleum Corporation  
Box 487, Farmington, New Mexico  
Address Attn: L. O. Speer, Jr.



NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO

Form C-110  
Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Pan American Petroleum Corporation Lease U.S.G. Section 19

Well No. 19 Unit Letter F S 19 T 29N R 10W Pool Hogback Dakota

County San Juan Kind of Lease (State, Fed. or Patented) Federal

If well produces oil or condensate, give location of tanks: Unit J S 19 T 29N R 10W

Authorized Transporter of Oil or Condensate Four Corners Pipeline Company

Address Box 1200, Farmington, New Mexico

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas \_\_\_\_\_

Address \_\_\_\_\_ Date Connected \_\_\_\_\_

(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

Reasons for Filing: (Please check proper box) New Well \_\_\_\_\_ ( )

Change in Transporter of (Check One): Oil ( ☒ ) Dry Gas ( ) C'head ( ) Condensate ( )

Change in Ownership \_\_\_\_\_ ( ) Other \_\_\_\_\_ ( )

Remarks: \_\_\_\_\_ (Give explanation below)

**This is to report change in transporter from Plateau, Inc. to Four Corners Pipeline Company effective November 1, 1960.**

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 19th day of October 19 60

ORIGINAL SIGNED BY  
G. L. Hamilton

By \_\_\_\_\_

Approved OCT 20 1960 19 \_\_\_\_\_

Title Area Clerk

OIL CONSERVATION COMMISSION

Company Pan American Petroleum Corporation

By Original Signed Emery C. Arnold

Address Box 480

Title Supervisor Dist. # 3

Farmington, New Mexico

Attn: L. O. Speer, Jr.

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.C.S.	
LAND OFFICE	
TRANSPORTER	OIL 1
PRODUCTION OFFICE	
OPERATOR	2

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Pan American Petroleum Corporation</b>				Lease <b>USG Section 19</b>		Well No. <b>19</b>	
Unit Letter <b>F</b>	Section <b>19</b>	Township <b>T-29-N</b>	Range <b>R-16-W</b>	County <b>San Juan</b>			
Pool <b>Hogback-Dakota</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>J</b>	Section <b>19</b>	Township <b>T-29-N</b>	Range <b>R-16-W</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>Platau, Inc.</b>				Address (give address to which approved copy of this form is to be sent)  <b>Box 567, Bloomfield, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>			Date Connected	Address (give address to which approved copy of this form is to be sent)			

If gas is not being sold, give reasons and also explain its present disposition:

**REASON(S) FOR FILING (please check proper box)**

New Well ☐  
 Change in Transporter (check one)  
 Oil ☒ Dry Gas ☐  
 Casing head gas ☐ Condensate ☐

Change in Ownership ☐  
 Other (explain below)



Remarks  
**This is to report a temporary change in transporter from Four Corners Pipeline Company to Platau, Inc. for the period 7:00 A.M. July 16, 1961, to 7:00 A.M. October 1, 1961.**

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **14th** day of **July**, 19 **61**.

**OIL CONSERVATION COMMISSION**

Approved by

**(Original Signed Emery C. Arnold)**

Title

**Supervisor Dist. # 3**

Date

**JUL 14 1961**

By

**ORIGINAL SIGNED BY**  
**A. E. TURNER**

Title

**Administrative Clerk**

Company

**Pan American Petroleum Corporation**

Address

**Box 480, Farmington, New Mexico**  
**Attn: L. J. Speer, Jr.**

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME <b>Navajo Tribal</b>	
2. NAME OF OPERATOR <b>PAN AMERICAN PETROLEUM CORPORATION</b>		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR <b>P. O. Box 480, Farmington, New Mexico</b>		8. FARM OR LEASE NAME <b>U.S.G. Section 19</b>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <b>1650' FWL and 2310' FWL</b>		9. WELL NO. <b>19</b>	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT <b>Hagback Dakota</b>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>GL 5250'</b>		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>SE 1/4 NW 1/4 Section 19 T-29-N, R-16-W</b>	
		12. COUNTY OR PARISH <b>San Juan</b>	
		13. STATE <b>New Mexico</b>	

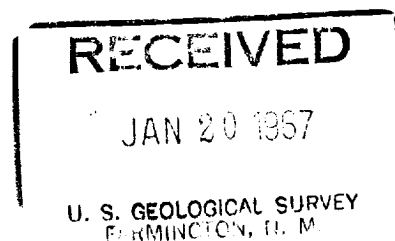
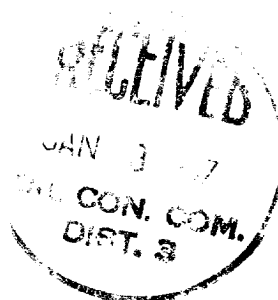
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input checked="" type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

**In an attempt to increase productivity, we propose to sand-oil fracture U.S.G. Section 19 Well No. 19 with 5,000 gallons treated oil containing 5,000 lbs. of sand.**

**Current producing rate: 1 BOPD and 1 BWPD.**



18. I hereby certify that the foregoing is true and correct  
Original Signed By  
**G. W. EATON, JR.**  
SIGNED **G. W. Eaton, Jr.** TITLE **Area Engineer** DATE **January 18, 1967**

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: