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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

I. 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:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input checked="" type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Gallegos Canyon Unit	Lease No.	Well No. 107	Pool Name, including Portion Basin Dakota	Kind of Lease State, Federal or Fee Fee
Location				
Unit Letter D	820	Feet From The North	Line and 990	Feet From the West
Line of Section 19	Township 29N	Range 12W	San Juan	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (If different from above, approved copy of this form is to be sent) P. O. Box 2077, Farmington, New Mexico					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (If different from above, approved copy of this form is to be sent) Security Life Building, Denver, Colorado					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 19	Twp. 29N	Rge. 12W	Is gas sold? Yes	When Not Available

If this production is commingled with that from any other lease or pool, give owner's name and number.

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas well	Deepen	Plug Back	Same Resrv.	Diff. Resrv.
Date Spudded	Date Compl. Ready to Prod.	Tubing Depth		P.E.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top of Gas Flow		Tubing Depth		
Perforations			Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD						
HOLE SIZE	CASING & TUBING SIZE		DEPTH	SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lead oil and must be equal to or exceed top allowable 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
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity Oil 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.

(Signature)
Administrative Assistant
(Title)
September 27, 1965
(Date)

OIL CONSERVATION COMMISSION
APPROVED **SEP 28 1965**, 19____
BY **Original Signed Emery C. Arnold**
TITLE **Supervisor Dist. # 3**

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted 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.