

NO. OF PERMITS REQUIRED 5  
DISTRIBUTION  
SANTA FE  
FILE  
U.S.G.S.  
LAND OFFICE  
TRANSPORTER OIL  
GAS  
OPERATOR  
PRORATION OFFICE

NEW PERMIT REQUIRED FOR OIL AND NATURAL GAS  
REQUIREMENTS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-64

AUTHORIZATION FOR OIL AND NATURAL 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 for Filing (Check proper box)  
New Well ☐ Change in Transporter ☐ Lease Name Change  
Recompletion ☐ Oil ☐ Previously:  
Change in Ownership ☐ Casinghead Gas ☐ McCarty Gas Unit "B" #1  
If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name McCarty Gas Com B	Lease No. 1	Well No. 1	Basin Basin Dakota	State of Lease State, Federal or Fee	Fee
Location Unit Letter O 790 Feet From The South 1850 Feet From The East Line of Section 16 Township 29N Range 11W San Juan County					

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Plateau, Inc.	Box 108, Farmington, New Mexico					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Box 990, Farmington, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 16	Twp. 29N	Range 11W	Yes	Not Available

If this production is commingled with that from any other lease or well, give name and number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Deepen	Plug Back	Same Res'ty.	Diff. Res'ty.
Date Spudded	Date Compl. Ready to Prod.	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
Perforations	Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

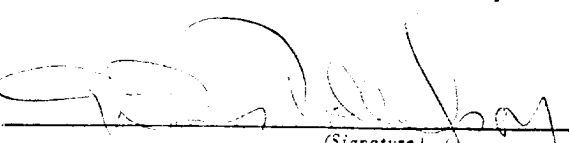
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

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

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 30, 1965  
(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 11 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 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 transportation or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.