ſ	NO. OF COPIES RECEIVED		·					
	DISTRIBUTION	NEW MEXICO OIL CO	SERVATION COMMISSION	Form C-104				
i_	SANTA FE	REQUEST FOR ALLOWABLE  Supersedes Old C-104 and C Effective 1-1-65						
1	FILE / -	AND						
SANTA FE / REQUEST FOR ALLOWABLE  FILE / AND  U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  LAND OFFICE Petro. to  TRANSPORTER GAS / Pan changed TROD. CO.								
1								
1	TRANSPORTER GAS	Pan American its name						
has v and the								
. :	PROPATION OFFICE	Anio						
* -	Operator							
	an American Petroleum Corporation							
	Firein							
	Security Life Building, Denver, Colorado 80202  [cason(s) for thing (Check proper box)] Other (Please explain)							
	New Well X	Change in Transporter of:	Jean ma	- Change				
	Recompletion	Oil Dry Gas						
	Change in Connecting	Casinghead Gas Condens	ate					
	change of ownership give name diaddress of previous owner							
	THORAT OF WELL AND LEAGE							
	DESCRIPTION OF WELL AND I	Well No. Pool Name	e, Including Formation	Kind of Lease				
	Hare G <del>as Unit</del> D Bas	Com 1 Basi	n Dakota	State, Federal or Fee Fee				
	Location			_				
	Unit Letter ; 2510 Feet From The South Line and 1170 Feet From The East							
	- /	San Juan						
	Line of Section 14, , Tow	Line of Jestics, 14, Township 29-N Range 11-W , NMPM, San Juan County						
111	DESIGN/THON CONTRANSPORT	TER OF OIL AND NATURAL GAS	5					
	Name of / uthorage .ansporter of Oil	or Condensate X	Address (Give address to writer approv					
	Plateau, 100 Box 108 Farmington, New Mexico  Box 108 Farmington, New Mexico  Address (Give address to which approved copy of this form is to be sent)							
	Name of Authorized Transporter of Cas		Box 990 Farmington, New Mexico					
	El Paso Matural Gas Co	Unit Sec. Twp. Rge.	Is gas actually connected? When					
	If well projuces oil or liquids, give location of tanks.	I 14 29-N 11-W	No					
	If this projuction is commingled with that from any other lease or pool, give commingling order number:							
ĭV.	COMPLETION DATA							
	Designate Type of Completion		X	1				
	Date Spudied	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
	7-12-65	8-8-65	6516	6481				
	Pool	Name of Producing Formation	Top ON/Gas Pay	Tubing Depth				
	Basín	Dakota	6240	6247 Depth Casing Shoe				
	Perforations (500-32 with 2			6516				
	0240-52 with 4	shots per foot.  TUBING, CASING, AND	CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
	12 1/4"	8 5/8"	525	400				
	7 7/8"	4 1/2"	6516	1600				
		2 3/8"	6247					
	3 1965							
V.	TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Color To Tanks  Date of Test  OR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to be kneed top allow able for this depth or be for full 24 hours)  Producing Method (Flow, pump, gas lift, etc.)  OIL ON COLOR.							
	OIL WELL  Date First New C., A.M. To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ft, etc.) OIL DIST. 3				
				Choke Size				
	Length of Test	Tubing Pressure	Casing Pressure	CHOKE SIZE				
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas - MCF				
	Actual Floa. During Test							
	GAS WELL		1-11-4					
	Actual Prod. 1. St-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate				
	5571 Testing Method (pitot, back pr.)	3 hours Tuoing Pressure	Casing Pressure	Choke Size				
	Back pressure	448	986	3/4"				
Ž.1	. CERTIFICATE OF COMPLIAN		OIL CONSERVA	OIL CONSERVATION COMMISSION				
7 1	, CHARLEST OF COME BIRM		~ GED 1 3 1965					
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED SEP 13 1965 Original Signed By					
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY A. R. KENDRICK					
	above is true and complete to the best of my knowledge and bester		TITLE PETROLEUM ENGINEER DIST. NO. 3					
			Î.					
	1.14. "		This form is to be filed in compliance with RULE 1104.					
	R. H. Beers		If this is a request for all well, this form must be are or	on the newly drilled or deepened				
		(Signature) well, this form must be accommodated to the tests taken on the method that the tests taken on the method.						
	HILLINI STIALIVE							

~ Dad Com # 1

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2057	
2919 5300	
5430 0315	
4,009 4,233	
4533 - 4939	<u>a</u> 1 1/3
5374 5435	1 1/1 1 1/2
5745 6157	3/4 1
6243	1

## LERIPLYIC

THIS IS TO CERTIFY that to this bast of my knowledge the above tabulation details the deviation tast taken on PAN AMERICAN PHYROLEUM CORPORATION'S have Gas Unit D #1, located at 2510 FSL and 1170 FEL, section 14, T-29-N, R-11-W, San Julia County, New Mexico.

		31gred <u>///22</u>		R. H. Beers	
		Title _	Administra	ive Apsistant	
THE STATE OF COLORADO)					
column ob prmakk )					

ETHORS AS, the undersignal authority, on this day personally appear A R. H. Beers known to me to be Admir estrative Assistant for Pan American Proreleum Corporation and to be the pauson whose name is subscribed to the above statement, who, being by me duly sworm on each, states that he has knowledge of the facts stated herein and that said otatement is true and correct.

