## NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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

## REQUEST FOR (CAS) 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. Cas must be reported on 15.025 psia at 60° Fahrenheit.

				Fa	rmington, N (Place)	lew Meac	Leo	October	1, 196 (Date)	
E ARE	HEREBY R	EQUESTI	NG AN ALLO	OWABLE FOR	A WELL KN	OWN AS	<b>5</b> :			
			RP. D. Mi	11 er	, Well No	.1	, in	.SW ,	4 SW	1/4,
(C M Unit 1	ompany or Op 	21	, T-30-N	(Lesse) , R-13-W	., NMPM.,	B	asin Dak	ota	·····	Pool
•			County. Da	ate Spudded8	17-64	Date D	rilling Com	pleted	8-28-4	4
	se indicate		Elevation	5403 (RDB)	Total	Depth	6063	PBTD	6028	<del></del> .
D	C B	A	PRODUCING I	Pay <b>566.</b> NTERVAL - <b>91</b>		shots	per foot	5864	.76 with	
E	F G	H		s 5938 Nome	Depth Casing			Dooth	5992	
L	K J	I	OIL WELL TE	<u>sr</u> -	,					Choke
			Test After	d. Test:Acid or Fracture	reatment (after	r recovery	of volume	of oil equ	al to volu Chol	ume of
K M	N O	P	load oil us	ed):bbl	s,oil,	bbls wat	er in	hrs,	min. Size	·
790 FS	L and 79	O FWL	Natural Pro	d. Test:	MCF/Da	ay; Hours	flowed	Choke	Size	
tubing ,Ce	sing and Cem	enting Recor		esting (pitot, ba						
Size	Feet	Sax	Test After	Acid or Fracture	Treatment: 3	300	MCF/L	Day; Hours	flowed	3
8-5/8	348	200	<u> </u>	3/4" Method o						
4-1/2	6094	1500		cture Treatment (					water, oil	., and
		1	0	920 gallons Tubing	Date first	new				
2-3/8	5892		Press.	Press. Z		tanks	Situe .	LB		
				rter Plateau.					<del></del>	
ļ	<u> </u>	-1-4-4 04	Gas Transpo	orter El Paso D, 1964 as Be	ein Dekote	Field	Develor	ment We	11. Co	pi.es
			attached.	,						
OI DEAT	LATION SU	LAGA WLG	# coaciions	•••••••••••	***************************************			***************************************	A STATE OF THE STA	
I her	eby certify t	hat the info	ormation given	n above is true a	nd complete to	the best	of my know	rledge.		
Approved.	OCT 5	1964		, 19	PAN AMERIC	AN PETE ORIGINAL	<b>COLEUM C</b> <b>Signed Byo</b> r Turner	UKP LELAT	CT5 1	3/4
			COMMISSI		Ву:		(Signature	\ \ \	CON.	
By: <b>O</b> 1	riginal Si	gned Em	ery C. Ar	noig	Title Admini	strati   Commu	re Clerk nications re	garding v		<del></del>
litle Si	ipervisor Di	st. # 3		······································	Name L. O.					
					Address P. C					

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## TABULATION OF DEVIATION TESTS PAN AMERICAN PETROLEUM CORPORATION

D.	MILLER	NO.	1

DEPTH	<u>DEVIATION</u>
7581 10871 21341 25461	1/2° 3/4° 3/4° 1
29691 38551 42941	3/40
49741 55181	1 •
57801	1 •

## AFFIDAVIT

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 D. Miller No. 1, Basin Dakota Field, located in the SW/4 of Section 21, T-30-N, R-13-W, San Juan County, New Mexico.

Signed 7. H Vallegard
Petroleum Engineer

THE STATE OF NEW MEXICO)  SS.  COUNTY OF SAN JUAN
COUNTY OF SAN JUAN )
PEFORE ME, the undersigned authority, on this day personally appeared F. H. Hollingsworth 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 \_\_\_\_\_ day of \_\_\_\_\_\_, 1964.

Notary Public