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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

Operator		Clinton Oil Co. - Operating Division	
Address		217 North Water, Wichita, Kansas 67207	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input checked="" type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

If change of ownership give name and address of previous owner

Pan American Petroleum Corp.

II. DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Federal Gas <del>Comp</del>	1	Blanco Mesa Verde	Federal	019414
Unit Letter H 1750 Feet From The North Line and 900 990 Feet From The East				
Line of Section 20 Township 32 N Range 12 W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Authorized Transporter of Oil	<input type="checkbox"/>	or Condensate	<input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Plateau, Inc.				Box 108, Farmington N. M.
Authorized Transporter of Casinghead Gas	<input type="checkbox"/>	or Dry Gas	<input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Co.				Box 990 Farmington N. M.
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
	H	20	32 N	12 W
				Is gas actually connected? When
				yes 12-4-57

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth			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				

V. 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 (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	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.

*Ch Woraduk*  
(Signature)  
Production Clerk  
(Title)  
7-2-70  
(Date)

OIL CONSERVATION COMMISSION

JUL 10 1970

APPROVED \_\_\_\_\_, 19\_\_\_\_

BY Original Signed by Emery C. Arnold  
SUPERVISOR DIST. #3

TITLE \_\_\_\_\_

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.