

FIELD: linesand-SA STATE: NM

OF: AMERICAN PETROLEUM CORPORATION MAP

30 Horton, Russell E.-Federal CO-ORD

Sec. 29, T-8-S, R-35-E

2310' fr S Line & 1650' fr W Line of Sec.

Spud 3-8-65

Comp 3-21-65

CSG & SX - TUBING	CLASS			
	FORMATION	DATUM	FORMATION	DATUM
LOG:				
8 5/8" 297' 225	Anhy 2192			
4 1/2" 4720' 250	SA 3935			
LOGS EL GR RA IND HC A	TD 4720', PBD 4719'			

IP San Andres Perfs 4696-4716' Swbd 177 BOPD + 66 BW. Pot.
Based on 19 hr test of 140 BO + 52 BW, gravity 27.

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CONT. PROP DEPTH 4700' TYPE
DATE

F.R. 3-11-65; Oper's Elev. 4219'.
PD 4700' - SA
3-9-65 TD 397', WOC.
3-15-65 Drlg. 4387'.
3-22-65 TD 4720', PBD 4719', COMPLETED.
Perf 4696-4716' W/2 SPF
Ac. 750 gals.
Swbd 140 BO, 88 BLW + 52 BNW in 19 hrs.
(Holding for tops)
3-29-65 TD 4720', PBD 4719', Completion Reported.

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GASForm C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

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TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

I. Pan American Petroleum Corp.
Box 68 Hobbs, N. M. 88240

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐

Other (Please explain)
**NAME CHANGED:
FROM: PAN AMERICAN PETR. CORP.
TO: AMOCO PRODUCTION CO.
EFFECTIVE 2-1-71**

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>USA Russell E. Horton</u>	Well No. <u>30</u>	Pool Name, including Formation <u>MILNESAND SAN ANDRES</u>	Kind of Lease State, Federal or Fee <u>FEDERAL</u>
Location Unit Letter <u>K</u> <u>2310</u> Feet From The <u>SOUTH</u> Line and <u>1650</u> Feet From The <u>WEST</u> Line of Section <u>29</u> Township <u>8-S</u> Range <u>35-E</u> NMPM, <u>ROOSEVELT</u> County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ <u>Magnolia Pipe Line Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 900 Dallas, Texas</u>					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ <u>McClair Oil & Gas Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 1470, Midland, Texas</u>					
If well produces oil or liquids, give location of tanks.	Unit <u>I</u>	Sec. <u>30</u>	Twp. <u>8</u>	Rge. <u>35</u>	Is gas actually collected? <u>Yes</u>	When <u>3-23-65</u>

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.
<u>X</u>								
Date completed <u>3-8-65</u>	Date Compl. Ready to Prod. <u>3-21-65</u>	Total Depth <u>4720' (CTD)</u>	P.E.T.D. <u>4719'</u>					
Name of Producing Formation <u>Milnesand</u>	Name of Producing Formation <u>San Andres</u>	Top Oil/Gas Pay <u>4696'</u>	Tubing Depth <u>4717'</u>					
Perforations <u>4696'-4716' w/2 JS PF</u>			Depth Casing Shoe <u>4720'</u>					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE <u>12 1/4"</u> <u>1 7/8"</u>	CASING & TUBING SIZE <u>8 5/8"</u> <u>4 1/2"</u>	DEPTH SET <u>397'</u> <u>4720'</u>	SACKS CEMENT <u>225</u> <u>250</u>					

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 Flow Oil Run To Tanks <u>3-21-65</u>	Date of Test <u>3-22-65</u>	Producing Method (Flow, pump, gas lift, etc.) <u>Swab + Flow</u>	
Length of Test <u>19</u>	Tubing Pressure <u>—</u>	Casing Pressure <u>—</u>	Choke Size <u>—</u>
Actual Flow During Test	Oil-Bbls. <u>140</u>	Water-Bbls. <u>88BLW-52 BNW</u>	Gas-MCF <u>NA</u>

GAS WELL

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

STATEMENT OF COMPLIANCE

I, _____, certify that the information given herein is true and correct and that the information given is true and correct to the best of my knowledge and belief.

OIL CONSERVATION COMMISSION

APPROVED _____

, 19 _____

BY _____

Deviation Surveys

<u>Depth</u>	<u>Angles</u>
390	$\frac{1}{4}$
350	$\frac{1}{4}$
1300	$\frac{1}{2}$
1840	$\frac{1}{4}$
2350	$\frac{3}{4}$
2680	1 -
3180	1 -
3515	1 $\frac{1}{4}$
3940	$\frac{1}{2}$
4150	$\frac{1}{2}$
4380	$\frac{1}{2}$
4710	$\frac{1}{2}$

The above are true and correct to the best of my knowledge and belief

J. E. Staley, Area Supt

Sworn to this date, March 23rd, 1965.

D. R. Moorhead
D. R. Moorhead, Notary Public
In and for Lea Co. N.M.

