								/			
								/			
:	NO. OF COPIES RECEIVED										
-	DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION						Form C-104		
-	SANTA FE /	_		REQUEST		FOR ALLOWABLE AND			Supersedes Old C-104 and C-110 Effective 1-1-65		
-	FILE										
-	U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS									
}	LAND OFFICE	TP 44									
	TRANSPORTER GAS /				Pan A	Eff. 2-1-71, Pan American Petro. Corp. has changed it.					
}	OPERATOR /				has c	merican i	Petro. Cor ts name to	p.			
_ }	PRORATION OFFICE					AMOCO PPO	s name to				
Ă	PRORATION OFFICE AMOCO PROD. CO.										
	PAN AMERICAN PETROLEUM CORPORATION										
 	Address										
	501 Airport Drive, Farmington, New Mexico - 87401										
Ì	Reason(s) for filing (Check proper box) Other (Please explain)								i :		
1	New Well X Change in Transporter of:							\$ 1			
į	Recompletion Oil Dry Gas								:		
i	Change in Ownership Casinghead Gas Condensate										
•											
	If change of ownership give name and address of previous owner										
	-										
и.,	DESCRIPTION OF WELL AND I	LEASE	io. Pool Name	e Including F	Cormation		Kind of Lease			Lease No.	
	20 200 1.1						State, Federal	orFee - ,			
	Jicarilla Contract 146	20	South	Blanco	Pictured	Cliffs		Ind	ian	Jicarilla	
	Location		37	. 7	11	50		¥+	(Contract 1	
	Unit Letter A ; 990	Feet i	From The <u>N</u> C	orth Li	ne and <u>II</u>	50	_ Feet From Th	e <u>East</u>			
	Town	nship 2.	5-North	Range	5-West	, NMPM,	Rio A	rriha		County	
	Line of Section 4 Tow	namp Z.)-NOT CIT	.,,-	J WEST		TO A				
111.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oll Name of Authorized Transporter of Cas	01	r Condensate	y Gas 🔀	Address (C		o which approve				
	El Paso Natural Gas Com	pany			P. O. B	ox 990, J	Farmingto	n, New Me	xico -	87401	
	If well produces oil or liquids,	Unit	Sec. Twp.	. Rge.	Is gas acti	uaily connected	a? wner	•			
	give location of tanks.	<u> </u>			lNo_					·	
	this production is commingled with that from any other lease or pool, give commingling order number:										
IV.	COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back S	ame Res'	v. Diff. Res'v.	
	Designate Type of Completio	n - (X)	1		1	1 1	1 1	1 †			
	Date Spudded		l. Ready to Pr	rod.	Total Dept	th	1	P.B.T.D.			
		1	10-1-69			30131			- 2978'		
	9-15-69 Elevations (DF, RKB, RT, GR, etc.)	Name of Pr	roducing Form	ation	Top Oil/G	as Pay		Tubing Depth			
	GR 6618, RKB 6632	Pictu	red Clif	fs	2	904		2902			
	Perforations							Depth Casing	Depth Casing Shoe		
	TUBING, CASING, AND CEMENTING RECORD										
	HOLE SIZE				DEPTH SET			SACKS CEMENT			
	12-1/4"		8-5/8"			225		200_s	<u>x</u>		
	7-7/8"		4-1/2"			3013 '		700_s	x		
		<u> </u>									
		<u></u>						· · ·		i	
V.	TEST DATA AND REQUEST FO	OR ALLO	WABLE (Test must be	after recovery	y of total volum r full 24 hours,	ne of load oil a }	nd must be equ	il to or e	xceed top allow=	
,	OII. WELL Date First New Oil Run To Tanks	Date of Te		aute jor titta t			, pump, gas lift	, etc.)	-OF		
	Date First New Oil Run to Lanks			, , , , , , , , , , , , , , , , , , , ,	, rodonių manas (s ir vi tyro vi			SFI'HIVEN			
		Tubing Pressure			Casing Pressure			Choke Size (LUL L			
	Length of Test	01.198			•				•	\	
	A awai Dags During Test	itual Prod. During Test Oil-Bbls.			. Water-Bbls.			Gas-MCF	CT3	n 1969	
	Actual Fiba, During 1981								,		
	OIL CON. CO								. COM.		
	GAS WELL								DIST	_ /	
	Actual Prod. Test-MCF/D	tual Prod. Test-MCF/D Length of Test 1671 (AOF 6708) 3 hr			_			Gravity of Condinacto			
								<u> </u>			
	Testing Method (pitot, back pr.)							Choke Size			
	Onen Florr					572 psig			3/4"		

VI. CERTIFICATE OF COMPLIANCE

Open Flow

OIL CONSERVATION COMMISSION OCT 3 0 1969

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.

ORIGINAL SIGNED BY

APPROVED_

Original Signed by Emery C. Arnold

572 psig

SUPERVISOR DIST. #3 This form is to be filed in compliance with RULE 1104.

G. W. Eaton, Jr. (Siznature) Area Engineer (Title)

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.

October 29, 1969 (Date)

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.

Seasone Forms C-104 must be filed for each pool in multiply