

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

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

Eff. 2-1-71,
Pan American Petro. Corp.
has changed its name to
AMOCO PROD. CO.

Operator PAN AMERICAN PETROLEUM CORPORATION	
Address P. O. Box 480, Farmington, New Mexico	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>
Change in ownership <input 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 _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name State Gas Unit BF	Well No. 1	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee State
Location			
Unit Letter A	940	Feet From The North Line and 1190	Feet From The East
Line of Section 16	Township 29-N	Range 9-W	NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of 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) P. O. Box 108, Farmington, New Mexico	
Name of 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) P. O. Box 990, Farmington, New Mexico	
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 16
	Twp. 29-N	Rge. 9-W
	Is gas actually connected? No	
	When	

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 <input checked="" type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded 1-4-65	Date Compl. Ready to Prod. 1-28-65		Total Depth 6881		P.B.T.D. 6872			
Pool Basin Dakota	Name of Producing Formation Dakota		Top of Gas Pay 6730		Tubing Depth 6760			
Perforations 6863-58, 6842-37, 6824-19 With 4 Shots Per Foot. 6744-32 With 4 Shots Per Foot.					Depth Casing Shoe 6881			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13-3/4"	10-3/4"		319		225			
9-7/8"	7-5/8"		2493		600			
6-3/4"	4-1/2"		6881		500			

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)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.

GAS WELL

Actual Prod. Test-MCF/D 1800	Length of Test 3 Hours	Bbls. Condensate/MMCF -	Gravity of Condensate -
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure 150	Casing Pressure 475	Choke Size 3/4"

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.

ORIGINAL SIGNED BY
L. R. Turner

(Signature)

Administrative Clerk

(Title)

February 2, 1965

(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 5 1965

Original Signed By
BY **A. R. KENDRICK**TITLE **PETROLEUM ENGINEER DIST. NO. 3**

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 Sections I, II, III, and VI only 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.

NO. OF COPIES RECEIVED	5
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	

Form O-104
 Supersedes Old C-104 and C-110
 Effective 1-1-65

AUTHORIZATION FOR DEVIATION TEST ON AND NATURAL GAS
 Eff. 2-1-71,
 Pan American Petro. Corp.
 same to

TABULATION OF DEVIATION TESTS PAN AMERICAN PETROLEUM CORPORATION

DEPTH	DEVIATION
319'	1/2°
722	1
1124	1
1434	1-3/4
1621	1-3/4
2053	1
2114	1
2490	2-3/4
2695	2-1/4
3100	1-3/4
3500	1-1/4
3900	1
4330	3/4
4750	3/4
5155	3/4
5600	1
6000	1-1/2
6425	1-3/4

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 State Gas Unit BF, Basin Dakota Field, located in the NE/4 NE/4 of Section 16, T-29-N, R-9-W, San Juan County, New Mexico.

Signed F. H. Hollingsworth
 Petroleum Engineer

THE STATE OF NEW MEXICO)
)
 COUNTY OF SAN JUAN) SS.

BEFORE 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 2nd day of February, 1965.

S. K. Lutz
 Notary Public

