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DISTRIBUTI	ON		,	NEW MEXIC	OOL CO	NSERVATI	ON COMMIS	SION	Forr
SANTA FE		/				OR ALLO			Sup
FILE		/				AND			Effe
U.S.G.S.			AUTHOR	Z-1-1	O TRAN	ISPORT O	IL AND NA	TURAL G	AS
LAND OFFICE				2-1-7	COM). .			
[RANSPORTER	OIL	1	Pan Ameri has chan	can Fetr	0. 00-				
IRANSFORIER	GAS	,	Pan Amer	ged its "	TOTTE .				
OPERATOR			has chan	ged its i	60.				
PRORATION OF	FICE		AMC	500 -					
	AMERIC	AN PE	TROLEUM COI	PORATION	l				
Address Secu	rity I	life B	silding - I	enver, (olor ad	o 80 20	2		
Reason(s) for filing							her (Please e	xplain)	
New Well	X		Change in 7	Transporter of	:				
Recompletion			Oil		Dry Gas				
Change in Ownersh	Tai		Casinghead	Gas	Condens	ate 🔲			
Lease Name	OF WEL	L AND	LEASE / Lease No	Well No.	Pool Nam	e, Including	Formation		Kind of Le
	Canvo	unit	(E-2447-)	211	Bas	in Dako	ta		State, Fede
Gallegos	Ganla								
Location Unit Letter	G	; 1650	Peet From		h Line		, NMPM,	Feet From	
Line of Section DESIGNATION Name of Authorized	G 32 OF TRA	Tov NSPOR	vnship 29N	R	inge 12	W Address (Gi	, NMPM,	which appro	San Ju
Location Unit Letter Line of Section DESIGNATION Name of Authorized	G 32 OF TRA H Transport	Tov	vnship 29N TER OF OIL A or Cor	AND NATU	rnge 12	Address (Gi	, NMPM, ve address to 3 - Farm	which appro	San Ju
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Line of Section DESIGNATION Name of Authorized Plateau, Name of Authorized	G 32 OF TRA d Transport Inc. d Transport stural	NSPORT ter of Oil rter of Cas	rer of oil A or Cor	AND NATU	rnge 12	Address (Gi Box 10 Address (Gi Box 99	, NMPM, ve address to 3 - Farm ve address to	which appro ington, which appro ington,	San Ju ved copy of the Mexical Copy of the Me
Location Unit Letter Line of Section DESIGNATION Name of Authorized Plateau, Name of Authorized If well produces of give location of tar	G 32 OF TRA d Transport Inc. d Transport stural l or liquid nks.	NSPORT ter of Oil ter of Cas Gas C	rer of OIL A or Cor singhead Gas & Gas Unit Sec. 3.	or Dry Gar	RAL GAS	Address (Gi Box 10 Address (Gi Box 99	, NMPM, ve address to 3 - Farm ve address to 0,- Farm vely connected No	which approington, which approington, ? Wh	San Ju ved copy of the Mexical Copy of the Me
Location Unit Letter Line of Section I. DESIGNATION Name of Authorized Plateau, Name of Authorized Il Paso No	G 32 OF TRA d Transport Inc. d Transport tural l or liquid nks. is commi	NSPORT ter of Oil ter of Cas Gas C	rer of OIL A or Cor singhead Gas 3.	or Dry Garage Twp. 2 298 other lease	RAL GAS	Address (Gi Box 10 Address (Gi Box 99	, NMPM, ve address to 3 - Farm ve address to 0,- Farm vely connected No	which approington, which approington, ? Wh	San Je ved copy of the New Mex. New Mex.

OREGINAL SIGNED BY D. I. TOLLEFSON

(Signature) Administrative Assistant

(Title)

(Date)

March 8, 1966

D. I. Tollefson

C-104 ersedes Old C-104 and C-110 ctive 1-1-65

ease Name	/ - · · · · · · · · · · · · · · · · · ·		ne, Including Format	ion	Kind of Lease State, Federal or Fee		
Gallegos Canyon Unit	E-2447-1/ 2	11 Bas	in Dakota		State, Federal of Fee	State	
ocation			1/26		# a=*		
Unit Letter;16	Feet From The	ROTED Line	e and 1650	Feet From	The Last		
Line of Section 32 To	wnship 29N	Range 1	tw , N	імрм,	Sam Juan	County	
ESIGNATION OF TRANSPOR	TER OF OIL AND N		S Address (Give add)	ress to which appro	oved copy of this form is	to be sent)	
	·	Box 103 - Farmington, New Mexico					
Plateau, Inc.	rsinghead Gas 🛣 or Dr	y Gas			oved copy of this form is	to be sent)	
Il Paso Natural Gas (Box 990,-	Farmington,	New Mexico		
	Unit Sec. Tw	p. Rge.	Is gas actually cor		nen		
f well produces oil or liquids, ive location of tanks.	32 2	9N 12W	No	1			
			-inc commingling	order number:			
this production is commingled w	ith that from any other I	ease or pool,	give comminging	order ridinoer.			
OMPLETION DATA	Oil Well	Gas Well	New Well Works	ver Deepen	Plug Back Same R	es'v. Diff. Res	
Designate Type of Completi	$\operatorname{Ion} - (X)$	X	X		· 		
Date Spudded	Date Compl. Ready to F	Prod.	Total Depth		P.B.T.D.		
1/24/66	2/16/66		6090	ı	6055		
Clevations (DF, RKB, RT, GR, etc.)			Top Oil/Gas Pay		Tubing Depth		
5480 BKB, 5469 GR	Dakota	i	6001	·	5891		
Perforations					Depth Casing Shoe		
6001-6019, 5914-	28	_			6090		
		CASING, AND	CEMENTING RE	CORD			
HOLE SIZE	CASING & TUB		T	TH SET	SACKS CI	EMENT	
12 1/4"	8 5/8	**	368		225 sacks		
7 7/8"	7 7/8" 4 1/2"		6090	<u> </u>	1500 sacks		
	2 3/8	71	5891				
			<u></u>				
EST DATA AND REQUEST I	FOR ALLOWABLE	(Test must be a	fter recovery of tota	l volume of load oi	l and must be equal to o	r exceed top al	
OIL WELL		able for this de	pth or be for full 24	hours)			
Date First New Oil Run To Tanks	Date of Test		Producing Method	(Flow, pump, gas	iji, eic.)		
			1		Choke Start	M.	
Length of Test	Tubing Pressure		Casing Pressure		CHOK TI FI	$\Lambda + D /$	
			Water Dal-		Ga - MELULI	ILD /	
Actual Prod. During Test	Oil-Bbls.		Water - Bbls.		_	1000	
					MAR14	1900	
-					OIL CON	L COM.	
GAS WELL	T- 3		Bbls. Condensate,	AMCE	Gravity of Company	i. 3	
Actual Prod. Test-MCF/D				/ IVIIVIC F	G. 20. 20. 20. 20.	" <i>" </i>	
5351	3 hrs		Cooling Decours		Choke Size		
Testing Method (pitot, back pr.)	Tubing Pressure		Casing Pressure	19)/ 4 "	
	431		+				
Back Pressure				VII CONCEDIA	ATION COMMISSI	CNI	
Back Pressure CERTIFICATE OF COMPLIA	NCE		1	IL CONSERV	A I TON COMMISS.	ON	
			APPROVED	MAR 14 196		19	

TITLE ___Supervisor Dist. # 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 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.