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	GAS	/
OPERATOR		
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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

I. Operator
Pan American Petroleum Corporation

Address
Security Life Building, Denver, Colorado 80202

Reason(s) for filing (Check proper box)
 New Well ☒ Change in Transporter of:
 Recompletion ☐ Oil ☐ Dry Gas ☐
 Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Note: This well previously designated as State 'BH' gas com. Put is being changed as indicated as the 'BH' relates to indexing the 'com' rather than the lease

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Lease No.	Well No.	Pool Name, Inc. or Loc.	Kind of Lease
State 'BH' Gas Com. 'BH' (OG-2005)	1		Basin Dakota	State, Federal or Fee State
Location				
Unit Letter	M	900 Feet From The	South	Line and 870 Feet From The West
Line of Section	32	Township	31N	Range 13W
				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)
Plateau, Inc.	Box 108, Farmington, New Mexico
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Co.	Box 990, Farmington, New Mexico
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas well? When
M 32 31N 13W	No

If this production is commingled with that from any other lease or pool, give name and number

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X				
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
3-17-65	9-14-65	6360	6325				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
5639 RDB, 5625 GR	Dakota	6142	6168				
Perforations			Depth Casing Shoe				
6142-58, 6169-74, 6218-24, 6202-12			6360				
TUBING, CASING, AND CEMENT DATA							
HOLE SIZE	CASING & TUBING SIZE	DEPTH FEET	SACKS CEMENT				
12 1/4"	8 5/8"	380	250				
7 7/8"	4 1/2"	6360	1500				
	2 3/8"	6168					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Text must be after recovery of first volume of load oil and must be equal to or exceed top allowable for this depth or be for full test case)

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
2983	3 hours		
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
Back Pressure	241	714	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.

OIL CONSERVATION COMMISSION

APPROVED OCT 14 1965

BY Original Signed Emery C. Arnold

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, or other such change of condition.

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

[Signature]
D. I. Tollefson
(Signature)
Administrative Assistant
(Title)
October 12, 1965
(Date)