

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
(Deviation Surveys on Back Side)

JUL 16 1 27 PM '65
Form C-104
Supersedes Old C-104 and
Effective 1-1-65

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FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

I. OPERATOR
Am American Petroleum Corp.
Address Box 68 Hobbs, N.M.
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>FEDERAL "A"</u>	Well No. <u>5</u>	Pool Name, Including Formation <u>BOUGH DEVONIAN</u>	Kind of Lease State, Federal or Fee <u>FED.</u>
Location Unit Letter <u>ATN</u> ; <u>810</u> Feet From The <u>SOUTH</u> Line and <u>1980</u> Feet From The <u>WEST</u> Line of Section <u>13</u> , Township <u>9-S</u> Range <u>35-E</u> , NMPM, <u>LEA</u> County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ <u>The Permian Corp. (Trucks)</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 3119 Midland, Texas</u>					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit <u>L</u>	Sec. <u>13</u>	Twp. <u>9</u>	Range <u>35</u>	Is gas actually connected? <u>NO</u>	When

If this production is commingled with that from any other lease or pool, give commingling order number: R-2926

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well ☒	Gas Well ☐	New Well ☒	Workover ☐	Deepen ☐	Plug Back ☐	Same Res'tv. ☐	Diff. Res'tv. ☐
Date Spudded <u>5-13-65</u>	Date Compl. Ready to Prod.		Total Depth <u>12,018'</u>		P.B.T.D. <u>12012'</u>			
Pool <u>BOUGH</u>	Name of Producing Formation <u>DEVONIAN</u>		Top Oil/Gas Pay <u>12002'</u>		Tubing Depth <u>11995</u>			
Perforations <u>12002 - 12012 w/2SPF</u>					Depth Casing Shoe <u>12018</u>			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<u>17"</u>	<u>13 3/8"</u>		<u>460</u>		<u>475</u>			
<u>12 1/4"</u>	<u>9 5/8"</u>		<u>10 34</u>		<u>1925</u>			
<u>8 3/4"</u>	<u>5 1/2"</u>		<u>12018</u>		<u>250</u>			

V. TEST DATA AND REQUEST FOR ALLOWABLE

(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 <u>7-15-65</u>	Date of Test <u>7-15-65</u>	Producing Method (Flow, pump, gas lift, etc.) <u>FLOWING</u>	
Length of Test <u>24</u>	Tubing Pressure <u>405</u>	Casing Pressure <u>—</u>	Choke Size <u>10/64</u>
Actual Prod. During Test	Oil-Bbls. <u>239 (434)</u>	Water-Bbls. <u>0</u>	Gas-MCF <u>18 (802)</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

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.

APPROVED 11 13 1965

BY

TITLE Linear District 1

This form is to be filed in compliance with RULE 112.

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.

(Signature)
Area Superintendent
(Title)
July 16, 1965
(Date)

DEVIATION SURVEYS

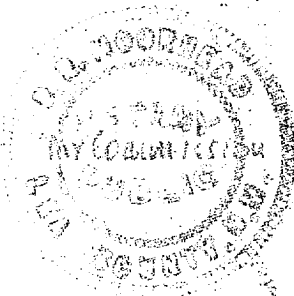
DEPTH	DEGREES OF
458	1/2
790	"
1287	"
1784	3/4
2230	"
2743	1-
3015	1 3/4
3402	1-
3621	1 1/4
4020	1-
4240	1 1/4
4450	3/4
4760	"
5408	1-
5875	1-
6345	1 1/4
6670	1-
6940	1 1/4
7275	3/4
7565	3/4
7990	1/2
8290	3/4
8535	1/2
8880	1-
9200	3/4
9660	1/2
9995	1-
10530	3/4
10860	1/4
11135	"
11440	3/4
11740	"

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

V.E. STALEY. AREA SUPT

SWORN TO THIS DATE, JULY 16th, 1965.

D.R. Moorhead
D.R. MOORHEAD, NOTARY PUBLIC
IN & FOR LEA Co. N.M.



EX-125 6-18-62