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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
 REQUEST FOR ALLOWABLE O. G. C.
 AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

(Deviation Survey - Back Side)

I. OPERATOR
 Operator: San American Petroleum Corp.
 Address: Box 68 Hobbs, New Mexico 88240
 Reason(s) for filing (Check proper box):
 New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name BASKETT "C"	Well No. 2	Pool Name, Including Formation CATO San Andres	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter J ; 1980 Feet From The South Line and 1980 Feet From The East Line of Section 10 Township 8-5 Range 30-E , NMPM, Chaves County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Scurlock Oil Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>414 428 Mid American Bldg. Midland, Tex.</u>					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 L	Sec. 11	Twp. 8	Rge. 30	Is gas actually connected? NO	When

If this production is commingled with that from any other lease or pool, give commingling order number: CTB-162

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 12-14-66	Date Compl. Ready to Prod. 12-27-66	Total Depth 3480'	P.B.T.D. 3454					
Elevations (DF, RKB, RT, GR, etc.) 4092' R.D.B	Name of Producing Formation San Andres	Top Oil/Gas Pay 3336'	Tubing Depth					
Perforations 3336'-3362', 3400'-3440' w/2 JSPF						Depth Casing Shoe 3480'		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		453'		300			
7 7/8"	4 1/2"		3480'		800			

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 Oil Run To Tanks 12-27-66	Date of Test 12-29-66	Producing Method (Flow, pump, gas lift, etc.) <u>Flowing Surab</u>		
Length of Test 24	Tubing Pressure —	Casing Pressure —	Choke Size —	
Actual Prod. During Test 110	Oil - Bbls. 93	Water - Bbls. 17	Gas - MCF 47 (Cor. 26.5' 802.501)	

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	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.

043 NMOC-14
 1- NSU
 1- SUSP
 1- RAY
 1- UNION TEXAS

 (Signature)
AREA SUPERINTENDENT

 (Title)
12-30-66

 (Date)

OIL CONSERVATION COMMISSION


APPROVED _____, 19____
 BY _____
 TITLE _____

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.

Oeniation Survey

DEPTH	DEGREES OFF
453-	3/4
961-	1/2
2105	3/4
2627	2 1/2
2896	3-
3138	2 1/4
3295	1 3/4
3480	2 3/4

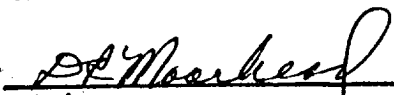
The above are true to the best of my knowledge.



 Area Superintendent

Sworn to this date, the 30th day of December, 1966





 Notary Public in & For Lea Co., N.M.
 My commission expires 6/19/68.

AREA SUPERINTENDENT