

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
STATE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
REGISTRATION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
 Santa Fe, New Mexico **RECEIVED** (Form C-104)
 Requested 7/1/60
REQUEST FOR (OIL) - ALLOWABLE
JUL 14 1960

New Well
 Recompletion

O. C. C.

This form shall be submitted by the operator before an initial allowable will be assigned to any new, or old oil or gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hobbs, New Mexico
 (Place)

July 8, 1960
 (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Pan American State of New Mexico "HF", Well No. 3, in NE $\frac{1}{4}$ SW $\frac{1}{4}$,
 (Company or Operator) (Lease)
6 Unit Letter, Sec. 34, T. 17S, R. 28E, NMPM, Empire Abo Pool

Eddy County. Date Spudded 6-20-60 Date Drilling Completed 6-29-60
 Elevation 3689 R.D.B. Total Depth 6247 PBTD 6215

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

Top Oil/Gas Pay 5840 Name of Prod. Form. Abo

PRODUCING INTERVAL -

Perforations 6107'-6137' w/2 SPT
 Open Hole _____ Depth _____ Casing Shoe 6247' Depth _____ Tubing 5910'

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____ Choke
 Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): 78 bbls. oil, _____ bbls water in 24 hrs, _____ min. Size 6/64"

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>8-5/8"</u>	<u>782</u>	<u>Gire.</u>
<u>4-1/2"</u>	<u>6247</u>	<u>900</u>
<u>2"</u>	<u>5910</u>	

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: _____ MCF/Day; Hours flowed _____

Choke Size _____ Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 3000 gal. 15%

Casing _____ Tubing _____ Date first new _____
 Press. Plr. Press. 825 oil run to tanks 7-1-60

Oil Transporter Service Pipe Line Co.

Gas Transporter _____

Remarks: Completed 7-2-60 as a flowing oil well.

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved JUL 14 1960, 19_____

Pan American Petroleum Corporation
 (Company or Operator)

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

By: _____
 (Signature)

Title Area Superintendent
 Send Communications regarding well to:

Title OIL AND GAS INSPECTOR

Name J. W. Brown

Box 68 - Hobbs, New Mexico

**OIL CONSERVATION COMMISSION
ARTESIA DISTRICT OFFICE**

No. Copies Received 4

DISTRIBUTION

	NO FURNISHED	
OPERATOR	<u>1</u>	
CAPITAL EL	<u>1</u>	
PRODUCTION OFFICE	<u>1</u>	<u>1</u>
STATE LAND OFFICE		
U. S. G. S.		
TRANSPORTER		
FILE	<u>1</u>	<u>1</u>
BUREAU OF MINES		

RECEIVED

NEW MEXICO OIL CONSERVATION COMMISSION JUL Form 90-110
SANTA FE, NEW MEXICO Revised 7/1/55

(File the original and 4 copies with the appropriate district office.)
DISTRICT OFFICE

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Pan American Petroleum Corporation Lease State of N.M., "EF"

Well No. 3 Unit Letter 6 S 34 T 17S R 20E Pool Empire Abo

County Elddy Kind of Lease (State, Fed. or Patented) State

If well produces oil or condensate, give location of tanks: Unit K S 34 T 17S R 20E

Authorized Transporter of Oil or Condensate Service Pipe Line Co.

Address Box 337 Midland, Texas

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas _____

Address _____ Date Connected _____

(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

Reasons for Filing: (Please check proper box) New Well (x)

Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()

Change in Ownership () Other ()

Remarks: (Give explanation below)

Flowing into State "EF" Tank Battery.

Completed 7-2-60 as a flowing oil well.

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 11th day of July 19 60

By J. Brown

Approved JUL 14 1961 19 61

Title Area Superintendent

OIL CONSERVATION COMMISSION

Company Pan American Petroleum Corp.

By M. L. Armstrong

Address Box 68

Title OIL AND GAS INSPECTOR

Hobbs, New Mexico

OIL CONSERVATION COMMISSION		
ARTESIA DISTRICT OFFICE		
No. Copies Received	6	
DISTRIBUTION		
	NO. FURNISHED	
OPERATOR	3	
SANTA FE	1	
EXPLORATION OFFICE		1111
STATE LAND OFFICE		
U. S. G. S.		
TRANSPORTER	1	
FILE		
BUREAU OF MINES	1	✓