		. مسر						
ĺ	NO. OF COPIES RECEIVED 5							
	DISTRIBUTION SANTA FE	1 3	ONSERVATION COMMI	MISSION Form C-104 Supersedes Old C-104 and C-11				
	FILE	4	AND	Effective 1-1-65				
	U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
	IRANSPORTER OIL	ALANG OWNER RECEIVED						
	GAS	NAME CHANGED						
1.	PRORATION OFFICE	PFROM: PAN AMERICAN PETR. CORP TO: AMOCO PRODUCTION CO. AUG 2 1966						
•	Control EFFECTIVE: 2-1-71							
	ARTERIA, OFFICE							
	Reason(s) for filing (Check proper box		Other (Please	evolain)				
	New Well	Change in Transporter of:						
	[freempletion]	OII Dry Go		•	Windfohr	1		
	Change in Ownership	Casinghead Gas Conder	nsqle LHANG	E IN	LEASE N	AME		
	If change of ownership give name and address of previous owner							
И.	DESCRIPTION OF WELL AND	LEASE						
•••	Leane Name	Well No. Pool Name, Including F	_ 1	Kind of Leas	-	Lease No.		
	WINDFOHR FEDER	AL EMPIRE	ARO	State, Federa	ol or Fee	_\		
	Unit Letter P: 66	O Feet From The SOUTH Lir	ne and 660	Feet From	The FAST			
	, ,	waship 18.5 Range	27- E , NMPM,	E,		County		
	Line of Section 70	with the state of	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		20 T			
111.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Eff. 4/1/70 name change from Address (Give address to which approved copy of this form is to be sent)							
	Service to Amoco Pipeline Co. 3411 KNDXVI			LE LUBBOCK TEXAS				
	Address (Give address to which approved copy of this form is to be sent					to be sent) P.		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connecte	C) 13 135	en O			
	give location of tanks.	P 4 18 27	YES	I	9-3-60			
	If this production is commingled wi COMPLETION DATA	th that from any other lease or pool,	give commingling order	number:				
	Designate Type of Completic	on - (X)	New Well Workover	Deepen	Plug Back Same Re	s'v. Diff. Res'v.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	<u>i</u>	P.B.T.D.	i		
	E)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth	· · · · · · · · · · · · · · · · · · ·		
	Elevations (DF, RKB, RT, GR, etc.) Effective 2-	1-71	top Ott/ Gde Pdy		I ubing bepin			
	Perforctions Gas Transpor			-Depth Casing Shoe	-Depth Casing Shoe			
	To: Amoco Production Co., Tubing, Casing, and Cementing Record							
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SE		SACKS CE	MENT		
T /	TECT DATE AND DECLIEFT F	OP ALLOWARIE (Test must be	the recovery of total value	ne of load oil	and must be equal to as	exceed top allow		
ν.	TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL. Date First New Oil Run To Tanks Date of Test Date of Test Producing Method (Flow, pump, gas lift, etc.)							
	Date First New Oil Run To Tanks	Pate of Test	Producing Method (Flow	, pump, gas (I	ijt, etc.)	•		
	Length of Test	Tubing Pressure	Casing Pressure		Choke Size			
	Actual Prod, During Test	Oil-Bbls.	Water-Bble.		Gas-MCF			
				`	<u> </u>			
	GAS WELL							
	Actual Prod, Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	,	Gravity of Condensate	0		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-	-in)	Choke Size			
	results werned thirds and his	(0000-111)		<u>, </u>				
VI.	CERTIFICATE OF COMPLIAN	CE	OIL C		ATION COMMISSIO)N		
			APPROVED AUG 2 / 1966 , 19					
	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.		By ML arustrono					
	moore to time and combiete to the	my manage and beston			chron			

I hereby certify that the rules and regulati Commission have been compiled with and above is true and complete to the best of	d that the information given
	044-NMOCC-1
	1- NSW
	1-080
	1-2726
(Signature)	1- ATLANTIC
AREA SUPT.	1- WMD Four
(Title)	1- LIEGLER
7-28-66	

(Date)

	AUG 2 1966	
BY JULL	AND SAS INSPECTOR	
TITLE	AND GAS INSPECTOR	

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.