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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

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

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AUG 2 1966

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
NAME CHANGED:
FROM: PAN AMERICAN PETR. CORP.
TO: AMOCO PRODUCTION CO.
EFFECTIVE: 2-1-71

O. C. C.
ARTESIA, OFFICE

Operator Pan American Petroleum Corporation		Other (Please explain) From R. F. Windfohr <u>Change In Lease Name</u>
Address <u>Box 68 Hobbs, New Mexico 88240</u>		
Reason(s) for filing (Check proper box)		
New Well	<input type="checkbox"/>	Change in Transporter of:
Recompletion	<input type="checkbox"/>	Oil <input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Condensing Gas <input type="checkbox"/>
		Dry Gas <input type="checkbox"/>
		Condensate <input type="checkbox"/>

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

Lease Name <u>Windfohr Federal 2</u>	Well No. <u>1650</u>	Pool Name, including Formation <u>Empire Lbs</u>	Kind of Lease <u>Federal</u>	Lease No.
Location Unit Letter <u>I</u> : <u>1650</u> Feet From The <u>South</u> Line and <u>330</u> Feet From The <u>East</u>				
Line of Section <u>4</u>	Township <u>18</u>	Range <u>27</u>	, NMPM, <u>Eddy</u> County	

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				Address (Give address to which approved copy of this form is to be sent)	
Eff. 4/1/70 name change from Service to Amoco Pipeline Co.				<u>3411 Knoxville Lubbock Texas</u>	
Empire Lbs. Production Plant				<u>Box 68 Hobbs, N.M.</u>	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? When
	<u>P</u>	<u>4</u>	<u>18</u>	<u>27</u>	<u>YES 9-3-60</u>

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

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) <u>Effective 2-1-71</u>	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
Perforations <u>Gas Transporter Name Changed:</u> <u>From: Pan American Petroleum Corp.</u> <u>To: Amoco Production Co.</u>		Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				

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 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
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.	
Area Sup't <u>7-28-66</u> (Date)	<u>044-NMOCC-A</u> <u>1-NSW</u> <u>1-OBP</u> <u>1-SOSP</u> <u>1-ATLANTIC</u> <u>1-Windfohr</u> <u>1-ZIEGLER</u> <u>10</u>

OIL CONSERVATION COMMISSION	
APPROVED <u>AUG 2 1966</u> , 19	
BY <u>ML Armstrong</u>	
TITLE <u>OIL AND GAS INSPECTOR</u>	
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.	