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OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mex

REQUEST FOR (OIL) - ~~(GAS)~~ ALLOWABLE

RECEIVED
APR 11 1961
New Well
Recompleted
Office

This form shall be submitted by the operator before an initial allowable will be assigned to any completed 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

April 10, 1961

(Place)

(Date)

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

Pan American Petroleum Corp. Greenwood Unit

Well No. 3, in SE 1/4 NE 1/4,

(Company or Operator)

(Lease)

H, Sec. 27, T. 12-S, R. 31-E, NMPM, Undesignated (Bone Springs) Pool

Unit Letter

Eddy

County. Date 3-23-61

Date Drilling Completed

Not yet completed

Elevation 3662' KDB Total Depth 12,858 PBD 9800'

Please indicate location:

Top Oil/Gas Pay 8135 Name of Prod. Form. Bone Springs

PRODUCING INTERVAL -

Perforations 8135'-8185' w/2 SPF

Open Hole _____ Depth _____ Casing Shoe 12,922 Depth _____ Tubing not yet set

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____

GAS WELL TEST -

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

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): 500 gal. LSTNE

Casing _____ Tubing _____ Date first new _____ Press. _____ oil run to tanks _____

Oil Transporter Texas New Mexico Pipe Line Company

Gas Transporter _____

Remarks: Request testing allowable of 340 bbls. oil.

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

Approved APR 11 1961, 19____

Pan American Petroleum Corporation
(Company or Operator)

Original Signed by:

By: V. E. STALEY (Signature)

Title Area Superintendent

Send Communications regarding well to:

Name V. E. Staley

Address Box 68, Hobbs, New Mexico

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

Title OIL AND GAS INSPECTOR