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	GAS
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NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mex.

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

MAY 13 1964

New Well
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE 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

May 12, 1964

(Place)

(Date)

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

Pan American Petroleum Corporation - Big Eddy Unit, Well No. 3, in SE 1/4 SE 1/4,

(Company or Operator)

(Lease)

P

Sec. 6

T. 20-S

R. 31-E

NMPM.

Wildcat

Pool

Unit Letter

Eddy

County. Date Spudded 1-28-64

Date Drilling Completed 4-23-64

Please indicate location:

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

660' F5 SE Lines

(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Sax
20"	366	450
13-3/8"	2,149	1,450
9-5/8"	4,574	750
5-1/2"	12,550	750

Elevation 3463 HDB Total Depth 13,091 PBTD 12,475

Top Oil/Gas Pay 11,316 Name of Prod. Form. Strawn

PRODUCING INTERVAL -

Perforations 11,334-11,354

Open Hole _____ Depth _____ Casing Shoe 12,550 Depth _____ Tubing 11,360

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 load oil used): 115 bbls, oil, 25 bbls water in 24 hrs, _____ min. Size 24/64 Choke

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): Acid with 1500 gal HCA.

Casing _____ Tubing _____ Date first new _____ Press. 225 oil run to tanks 5-4-64

Oil Transporter The Permian Corporation (Trucks)

Gas Transporter None

Remarks: _____

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

Approved MAY 13 1964, 1964

Pan American Petroleum Corporation

(Company or Operator)

Original Signed by

By: V. E. STALEY

(Signature)

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

Title Area Superintendent

Title OIL AND GAS INSPECTOR

Send Communications regarding well to:

Name V. E. Staley

Address Box 68 - Hobbs, New Mexico