

**NEW MEXICO**  
**CIL CONSERVATION COMMISSION**  
P. O. BOX 2088  
**SANTA FE, NEW MEXICO**

GAS SUPPLEMENT NO. ~~XXXX~~ (SE) **SF 2868** DATE ~~XXXX~~ **1-3-67**

**NOTICE OF WELL CONNECTION OR AUTHORITY TO ASSIGN ALLOWABLE**  
**ALL VOLUMES EXPRESSED IN MCF**

The operator of the following well has complied with all the requirements of the Oil Conservation Commission and may be assigned an allowable as shown below.

Date of Connection \_\_\_\_\_ Date of ~~DISCONTINUANCE~~ or Allowable Change **11-1-66**  
Purchaser **SU GAS CO.** Pool **INDIAN BASIN UPPER PENN.**  
Operator **PANAM PETRO. CORP.** Lease **HOC FEDERAL**  
Well No. **1** Unit Letter **F** Sec. **13** Twp. **22** Rnge. **23**  
Dedicated Acreage \_\_\_\_\_ Revised Acreage \_\_\_\_\_ Difference \_\_\_\_\_  
Acreage Factor \_\_\_\_\_ Revised Acreage Factor \_\_\_\_\_ Difference \_\_\_\_\_  
Deliverability \_\_\_\_\_ Revised Deliverability \_\_\_\_\_ Difference \_\_\_\_\_  
A x D Factor \_\_\_\_\_ Revised A x D Factor \_\_\_\_\_ Difference \_\_\_\_\_

ORIGINAL SIGNED

BY FRED MARES

**ERROR IN SCHEDULE**

GAS FIELD SECTION  
SUPERVISOR, DISTRICT

**RECALCULATION OF SUPPLEMENTAL ALLOWABLE**

MONTH	% OF MO.	ALLOWABLE DIFFERENCE	MONTH	% OF MO.	ALLOWABLE DIFFERENCE
JANUARY			JULY		
FEBRUARY			AUGUST		
MARCH			SEPTEMBER		
APRIL			OCTOBER		
MAY			NOVEMBER		
JUNE			DECEMBER		

TOTAL AMOUNT OF (Cancelled or ~~XXXXXXX~~) ALLOWABLE **- 4**

PREVIOUS **DEC.** MONTH NET ALLOW. **341372** REVISED **DEC.** MONTH NET ALLOW. **341368**

PREVIOUS **JAN.** MONTH CURRENT ALLOW. **73926** REVISED **JAN.** MONTH CURRENT ALLOW. **NO CHANGE**

EFFECTIVE IN THE **FEB.** MONTH PRORATION SCHEDULE.

REMARKS: **October Volume previously reported as 47332 not 47336 as listed on Adjustment sheet for November. Difference of +13 should be +9.**

**NOTICE OF SHUT-IN**

The following described well has been Shut-in for Failure of Compliance:

Purchaser \_\_\_\_\_ Pool \_\_\_\_\_ Date \_\_\_\_\_  
Operator \_\_\_\_\_ Lease \_\_\_\_\_  
Well No. \_\_\_\_\_ Unit Letter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ Rnge. \_\_\_\_\_  
Effective date of Shut-in \_\_\_\_\_ Reason for Shut-In \_\_\_\_\_

A. L. PORTER, Jr., Director

By \_\_\_\_\_