| | | | | / | | |
|--|---|---|---------------------------------------|---------------------------|------------------|--|
| NO. OF COPIES RECEIVED | - | | | | | |
| DISTRIBUTION | - | | | | | |
| SANTA FE / | | ONSERVATION COMMISS | ION | Form C-104 Supersedes Old | d C-104 and C-1. | |
| FILE / | REQUEST | FOR ALLOWABLE AND | | Effective 1-1-6 | | |
| | AUTHODIZATION TO TRA | MIND MISPORT OIL AND NA | TUDAL GAS | | | |
| U.S.G.S. | AUTHORIZATION TO TRA | ANSPORT OIL AND NA | TORAL GAS | | | |
| OIL / | Pan American Petro. | 7015. | | | | |
| TRANSPORTER GAS / | Pan American Petro. has changed its name has changed PROD. CO. | U U | | | | |
| OPERATOR / | has changed PROD. CO. | 7. | | | | |
| PROBATION OFFICE | has changed its name. AMOCO PROD. CO. | | | | | |
| Operator | | | | | | |
| PAN AMERICAN PETROLEUM | 1 CORPORATION | | | | | |
| Address | | | | | | |
| 501 Airport Drive, Far | rmington, New Mexico - 87 | 401 | | | | |
| Reason(s) for filing (Check proper ba | x) | Other (Please ex | cplain) | | | |
| New Well X | Change in Transporter of: | | | | | |
| Recompletion | Oil Dry Go | | | | | |
| Change in Ownership | Casinghead Gas Conder | nsate | | | | |
| (c) | | | | • | | |
| If change of ownership give name and address of previous owner | | | | | | |
| · | | | | | | |
| DESCRIPTION OF WELL AND | Well No. Pool Name, Including F | ormation K | ind of Lease | | Lease No. | |
| Lease Name | | i e | tate, Federal or F | ee Indian | Jicarill | |
| Jicarilla Contract 14 | 6 19 Basin Dakot | .a | | | Contract | |
| Location (A) OO | North | . 1070 | Feet From The | East | | |
| Unit Letter A ; 99 | Feet From The North Lin | ne and | reet riom The | 2006 | | |
| | ownship 25-North Range | 5-West NMPM, | Rio Arri | h a | County | |
| Line of Section 4 T | ownship 25-North Hange | J-west | NIU ALL | <u>иа</u> | | |
| TOTAL TO A STORY OF THE ANSPORT | RTER OF OIL AND NATURAL GA | AS | | | | |
| Name of Authorized Transporter of C | or Condensate X | Address (Give address to | which approved co | opy of this form is | to be sent; | |
| Plateau, Inc. | _ | P. O. Box 108, | Farmington | . New Mexic | ·o - 87401 | |
| Name of Authorized Transporter of C | asinghead Gas or Dry Gas X | Address (Give address to | which approved c | opy of this form is | to be sent; | |
| | | P. O. Box 990 | Farmington | New Mexic | o - 87401 | |
| El Paso Natural Gas Co | Unit Sec. Twp. Rge. | Is gas actually connected | ? When | - | | |
| If well produces oil or liquids, give location of tanks. | Δ | No | <u> </u> | | | |
| | with that from any other lease or pool, | give commingling order r | umber: | | | |
| COMPLETION DATA | | | | ag Back Same Re | es'v. Diff. Res | |
| | Oil Well Gas Well | New Well Workover | Deepen | id Back Sallie Me | , Dim nos | |
| Designate Type of Comple | 1 | X | | B.T.D. | i | |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | F | | | |
| 8-28-69 | 10-2-69 | 7494 | | 7459 bing Depth | | |
| Elevations (DF, RKB, RT, GR, etc. | Name of Producing Formation | Top Oil/Gas Pay | 14 | • | | |
| GR 6618, RKB 6632 | Dakota | 7109 | De | 7276 pth Casing Shoe | 7493 | |
| | ODE 70/6 50 7056 59 7 | 779_97 7794 _ 7301 | | • | 7423 | |
| $7109-14 \times 7121-26 \text{ w/4}$ | SPF, 7246-50, 7256-58, 7 | 270-02, 7294-7303 | . X 7550 50 | W/Z OII | | |
| | | DEBTH SE | | SACKS CE | EMENT | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SE | | | | |
| 12-1/4" | 8-5/8" 4-1/2" | 448 7493 | | 300_s: 1900_s: | | |
| 7-7/8" | 4-1/2 | 7473_ | | 2700 32 | | |
| | | | | | | |
| | | <u> </u> | | muse he saust so s | r exceed ton old | |
| TEST DATA AND REQUEST | FOR ALLOWABLE (Test must be | after recovery of total volum depth or be for full 24 hours) | e oj toda ott and l | wrest na admentic o | | |
| OIL WELL | Date of Test | Producing Method (Flow. | pump, gas lift, et | c.) | | |
| Date First New Oil Run To Tanks | 20.00.100. | | | 65 | | |
| | Tubing Pressure | Casing Pressure | C | Fre PELULI | 1111 | |
| Length of Tes: | . wany | | | | | |
| The state of the s | Oil-Bbls. | . Water-Bbls. | 4. | TO TOPET 30 | 1969 | |
| Actual Prod. During Test | J. 2-1-1 | | | | | |
| | | | | OIL CON. | COM / | |
| | | | | DIST | | |
| GAS WELL Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | G | ravity of Condense | | |
| · | | _ | | | | |
| 2127 (AOF 2209) | 3 hr. Tubing Pressure (Shut-in) | Casing Pressure (Shut- | in) C | hoke Size | | |
| Testing Method (pitot, back pr.) | • | 2365 psig | | 3/4" | | |
| Open Flow | 2404 psig | | | ON COMMISSI | .ON | |
| . CERTIFICATE OF COMPLIANCE | | 012 0 | | | 3 0 1969 | |
| | | APPROVED | | | -, 19 13U3 | |
| I hereby certify that the rules a | nd regulations of the Oil Conservation with and that the information give | n | | الم السوا | | |
| Commission have been complied above is true and complete to | the best of my knowledge and belief | f. By_Original_S | BY Original Signed by Emery C. Arnold | | | |
| | | | TITLE SUPERVISOR DIST. #8 | | | |
| | | 11 11 LE | | | ** " | |

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.

ORIGINAL SIGNED BY

G. W. Eaton, Jr.

Area Engineer

October 28, 1969

(Signature)

(Title)

(Date)