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SANTA FE				
FILE		1	-	
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL	\int		
	GAS	1		
OPERATOR		1		
PRORATION OFFICE				
Operator				

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

_ GA	Effective 1-1-6	d C-104 and C-110 55
ease	Indian	Lease No.
om Th		
prove ing prove	rriba d copy of this form is ton, New Mexic d copy of this form is ton, New Mexic	o 87401 to be sent)
	Plug Back Same Re	
	Tubing Depth 70 Depth Casing Shoe	59' 46'
	SACKS CEI 310 sacks 1950 sacks	MENT
	nd must be equal to or	
	Chok Sign CT	
	OIL CON DIST Gravity of Condensate	. 3
	Choke Size	3/4" ON
70 by	Emery C. Arn	old

	FILE /	NEGOES!	AND	Effective 1-1-65			
	u.s.g.s.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL	GAS			
	LAND OFFICE	Eff. 2-1-71,					
	TRANSPORTER OIL /		ΣΕΛ. •.				
	GAS /	Pan American Petro has changed its name has changed PROD. CO.					
	OPERATOR /	has changed 105 AMOCO PROD. CO.					
I.	PRORATION OFFICE Operator	AMOOO		····			
	PAN AMERICAN PETROLEUM CORPORATION						
	Address	IROLEUM CORPORATION					
		vo Torredoctor New Manda	- 07/01				
	Sol Airport Drive, Farmington, New Mexico 87401 Reason(s) for filing (Check proper box) Other (Please explain)						
	New Well	Change in Transporter of:					
	Recompletion	Oil Dry Ga:	s				
	Change in Ownership	Casinghead Gas Conden	sate				
	If change of ownership give name and address of previous owner						
Ħ.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fo	ormation Kind of Lea	ise Indian Lease No.			
	Lease Name		l l	Indian Lease No. ral or Fee Jicarilla Contract 1			
	Jicarilla Contract 146	22 Basin Dakota	a state, reac	Jicarilla contract I			
		Nowth	960	FI 4			
	Unit Letter A ; 630	Feet From The North Line	e and Feet From	n The			
	Line of Section 10 To	wnship 25-N Range	5-W , NMPM, Rio	Arriba County			
	Ellie of Section 10	25 N					
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S				
	Name of Authorized Transporter of Oll	or Condensate 🕎	Address (Give address to which appr	roved copy of this form is to be sent)			
	Plateau, Inc.		P. O. Box 108, Farmi	ngton, New Mexico 87401			
	Name of Authorized Transporter of Cas	singhead Gas 🔲 💮 or Dry Gas 🏋	1	roved copy of this form is to be sent)			
	El Paso Natural Gas Co			ngton, New Mexico 87401			
	If well produces oil or liquids,	Unit Sec. Twp. Rge.		/hen			
	give location of tanks.	A 10 25N 5W	No				
		th that from any other lease or pool,	give commingling order number:				
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.			
	Designate Type of Completic		1				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
		9-18-70	7446'	7411'			
	8-23-70 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	GR 6672', RKB 6686'	Dakota	7150'	7059*			
	Perforations			Depth Casing Shoe			
	7150-58', 7284-90, 732	3-30', 7335-40'		7446*			
		T	CEMENTING RECORD	SACKS CENENT			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	12-1/4"	8-5/8" 4-1/2"	457 [†]	310 sacks 1950 sacks			
	7-7/8"	4-1/2	/440	1930 Sacks			
			i				
v	TEST DATA AND REQUEST F	OR ALLOWABLE. (Test must be a)	fter recovery of total volume of load o	il and must be equal to or exceed top allow-			
٠.	OIL WELL	able for this de	pth or be for full 24 hours)				
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)			
			Casing Pressure	Chok Sign			
	Length of Test	Tubing Pressure	Cdaing Pressure	SHOW SHALL DELLA			
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gan-MCFOCT 9 1970			
	Actual Prod. During 1981	5.1-23.2.					
			<u></u>	OIL CON. COM.			
	GAS WELL DIST. 3						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	2305 (AOF 2358)	3 hr.					
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
	Open Flow	2445 psig	Packer	3/411			
VI.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERV	ATION COMMISSION			
			ARRENAL OCT 9 197	0			
	I hereby certify that the rules and regulations of the Oil Conservation		AFFROVED				
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY Original Signed by Emery C. Arnold					
	ONICHAE DE COMPLETO CO		TITLE SUPERVISOR DIST. #5				
			11:				
	omana D. A. Vi	(1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		n compliance with RULE 1104. owable for a newly drilled or deepened			

(Signature) Area Engineer (Title) October 7, 1970

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.