

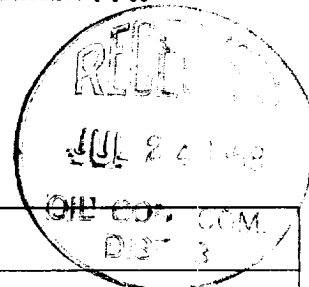
NO. OF COPIES RECEIVED		5
DISTRIBUTION		
SANTA FE		/
FILE		/
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	/
OPERATOR		2
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Eff. 2-1-68
Pan American Petro. Corp.
has changed its name to
AMOCO PROD. CO.



Operator PAN AMERICAN PETROLEUM CORPORATION		
Address 501 Airport Drive, Farmington, New Mexico 87401		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	NOTE: Dual completion in Dakota and Pictured Cliffs.
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of ownership give name and address of previous owner _____		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla Gas Com "C"	Well No. 1	Pool Name, Including Formation South Blanco Pictured Cliffs	Kind of Lease State, Federal or Fee Indian	Lease No. 155
Location				
Unit Letter #A	1100	Feet From The North	Line and 800	Feet From The East
Line of Section 32	Township 26-N	Range 5-W	, NMPM, Rio Arriba County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> None	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, New Mexico 87401	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected? No When _____	

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					X
Date Spudded 4-29-68	Date Compl. Ready to Prod. 6-28-68		Total Depth 7450'		P.B.T.D. 7396'			
Elevations (DF, RKB, RT, GR, etc.) GL 6638', RDB 6650'	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 2956'		Tubing Depth 2951'			
Perforations 2962-95 x 2 SPF					Depth Casing Shoe 7450'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/4"	8-5/8"		445'		400 sacks			
7-7/8"	5-1/2"		7450'		1250 sacks			
	1-1/2"		2951'					
	(2-1/16")		(7270' & Pkr. 7042')					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 2199 (LOF 5940)	Length of Test 3	Bbls. Condensate/MMCF -	Gravity of Condensate -
Testing Method (pitot, back pr.) Open Flow	Tubing Pressure (shut-in) 641	Casing Pressure (shut-in) 642	Choke Size 3/4"

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

ORIGINAL SIGNED BY
G. W. Egan Jr.
(Signature)

Area Engineer

(Title)

July 22, 1968

(Date)

OIL CONSERVATION COMMISSION

APPROVED **8-9-68**, 19____

BY **Original Signed by Emery C. Arnold**

SUPERVISOR DIST. **753**

TITLE _____

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.