NO. OF COPIES RECEIVED 4			1
DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSION	Form C-104
SANTA FE	•	FOR ALLOWABLE	Supersedes Old C-104 and C-11
FILE / v		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL G	AS
LAND OFFICE	Fig. 2-1-7P, Merican Petro. (jezz.	
TRANSPORTER OIL	Pan American Petro. has changed its name has changed PROD. 00.	to	
GAS	Pan changed its 1		
OPERATOR /	has changed its has changed AMOOO PROD. CO.	•	
PRORATION OFFICE			
Operator			•
PAN AME	RICAN PETROLEUM CORPORA	TION	
Address	***		
501 Air	port Drive, Farmington,	New Mexico 87401	
Reason(s) for filing (Check proper box,		Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Cil Dry G	as <u>X</u>	
Change in Ownership	Casinghead Gas Conde	ensate	
If change of ownership give name			
and address of previous owner	LEACE		
I. DESCRIPTION OF WELL AND	Well No. Pool Name, Including	Formation Kind of Lease	Lease No.
R. P. Hargrave "L"	1 Basin Dako	ta State, Federal	cr FeeFederal SF 077382
Location			1
м 99/) - South	ine andFeet From T	he West
Unit Letter	Feet From The South	ine andFeet rom i	ne WCSL
A	vaship 27-N Range	10-W , NMPM,	San Juan County
Line of Section 4 Tov	vnsnip - Runge	11.00	Dan Gall
I. DESIGNATION OF TRANSPORT	TED OF OU AND NATURAL G	AS	
Name of Authorized Transporter of Off	or Condensate	Address (Give address to which approx	ed copy of this form is to be sent)
Name of Authorized Transporter of Cas	singhead Gas or Dry Gas X	Address (Give address to which approv	ed copy of this form is to be sent)
Southern Union Gat		Box 398, Bloomfield, N	
Bodelidzii Ottoli Odel	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	
If well produces oil or liquids, give location of tanks.	ont Sec. Twpgc.	Yes	August 2, 1970
If this production is commingled wi	th that from any other lease or pool	, give commingling order number:	
V. COMPLETION DATA		New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.
Designate Type of Completic		New Well Workover Deepen	Flug Back Same Hes William Hes VI
Designate Type of Completion			D.D. T.D.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Flevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth
			· · · · · · · · · · · · · · · · · · ·
Perforations	.1		Depth Casing Shoe
	TUBING, CASING, AN	ND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	:		
			- Care
V. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be	after recovery of total volume of load oil	and must be equal to or expend top allow
OIL WELL	able for this	depth or be for full 24 hours)	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li)	(t, etc.)
		·	Alle on we

Length of Test

Tubing Pressure

Casing Pressure

Choke Size

Chok

GAS WELL

Actual Prod. Test-MCF/D

Length of Test

Bbls. Condensate/MMCF

Gravity of Condensate

Testing Method (pitot, back pr.)

Tubing Pressure (shut-in)

Casing Pressure (shut-in)

Choke Size

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.

UKIUMAL SIGNED BY

6. 10 101-1-1

(Signature)
Administrative Assistant
(Title)

August 27, 1970

(Date)

OIL CONSERVATION COMMISSION

BY Original Signed by Emery C. Arnold

TITLE SUPERVISOR DIST. #3

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.