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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE
ANDForm C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Eff. 2-1-66
Pan American Petro. Corp.
has changed its name to
AMOCO PROD. CO.

I. OPERATOR		
Pan American Petroleum Corporation		
Address		
Security Life Building - Denver, Colorado		
Reason(s) for filing (Check proper box)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
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"/>
Other (Please explain)		

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Lease No.	Well No.	Pool Name, Including Formation	Kind of Lease
Pipkin Gas Com "A"		1	Basin Dakota	State, Federal or Fee Federal
Location				
Unit Letter	N	790	Feet From The South	Line and 1550
				Feet From The West
Line of Section	7	Township	27-N	Range 10-W
				NMPM, San Juan
				County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Plateau, Inc.	Box 108, Farmington, New Mexico					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	Box 990, Farmington, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually condensed?	When
	N	7	27-N	10-W	No	

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					
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.				
6-6-66	7-2-66	6252		6218				
Elevations (DF, RKB, RT, GR, etc.) (RDB) 5824	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth				
	Dakota	6016		6064				
Perforations						Depth Casing Shoe		
6130-60, 6046-54, 6077-82						6252		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		363		225			
7-7/8"	4-1/2"		6252		1400			
	2-3/8"		6064					

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

RECEIVED
JUL 20 1966
OIL CON. COM.
DIST. 3

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
4423	3 hrs.		
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
Back Pressure	357	754	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
H. M. Smith

(Signature)

Administrative Assistant

(Title)

7-8-66

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 20 1966, 19
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 allow-
able 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.

TABULATION OF DEVIATION TESTS
PAN AMERICAN PETROLEUM CORPORATION

<u>DEPTH</u>	<u>DEVIATION</u>
363'	1/4 ^o
777	1/2
1183	1/2
1355	1-1/2
1811	1
2218	1
2594	1
2896	3/4
3270	3/4
3880	3/4
4353	1
4876	1
5359	1-1/2
5690	2
6045	3
6250	1-1/2

A F F I D A V I T

THIS IS TO CERTIFY that to the best of my knowledge the above tabulation details the deviation test taken on PAN AMERICAN PETROLEUM CORPORATION'S Pipkin Gas Com "A" #1, located 790' FSL and 1550' FWL Section 7, SE/4 SW/4, T-27-N, R-10-W, San Juan County, New Mexico.

ORIGINAL SIGNED BY
H. M. SMITH
Signed _____
Title Administrative Assistant

THE STATE OF COLORADO))
COUNTY OF DENVER)) SS.

BEFORE ME, the undersigned authority, on this day personally appeared H. M. Smith known to me to be Adm. Assistant for Pan American Petroleum Corporation and to be the person whose name is subscribed to the above statement, who, being by me duly sworn on oath, states that he has knowledge of the facts stated herein and that said statement is true and correct.

SUBSCRIBED AND SWORN TO before me, a Notary Public in and for said County and State this _____ day of _____, 196_.

Notary Public

My Commission Expires _____ My Commission expires June 3, 1970

