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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

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

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
AND
Pan American Petro.
has changed its name to
AMOCO PROD. CO.

Operator	
Pan American Petroleum Corporation	
Address	
Security Life Building - Denver, Colorado	
Reason(s) for filing (Check proper box)	
New Well	<input checked="" type="checkbox"/>
Recompletion	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>
Change in Transporter of:	
Oil	<input type="checkbox"/>
Casinghead Gas	<input type="checkbox"/>
Dry 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	Lease No.	Well No.	Pool Name, Including Formation	Kind of Lease
Jack Frost Gas Com "E"		1	Basin Dakota	State, Federal or Fee Federal
Location				
Unit Letter	D	790	Feet From The North	Line and 1170
Line of Section		25	Township	27-N
Range		10-W	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.
	D	25	27-N	10-N
Is gas actually connected?	When			
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.			
5-24-66	7-2-66		7052		7015			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
(RDB) 6606	Dakota		6805		6841			
Perforations	Depth Casing Shoe							
6990-7005, 6927-47, 6835-45	7052							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		346		225			
7-7/8"	4-1/2"		7052		1500			
	2-3/8"		6841					

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
5058	3 hours		
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
Back Pressure	408	889	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.

Administrative Assistant
(Signature)
Administrative Assistant
(Title)
7-7-66
(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 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.

TABULATION OF DEVIATION TESTS
PAN AMERICAN PETROLEUM CORPORATION

<u>DEPTH</u>	<u>DEVIATION</u>
346'	1/2°
745	1/2
1153	1/2
1592	1/2
1810	1/2
2218	1/2
2626	3/4
3002	1
3379	1
3610	1
3881	1
4258	1-1/4
4823	1
5136	3/4
5513	3/4
5889	1
6170	1-1/2
6346	1-1/4
6849	1

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 Jack Frost Gas Com "E" No. 1, located 790' FNL and 1170' FWL Section 25, NW/4 NW/4, T-27N, 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

