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NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104

Supersedes Old C-104 and C-110

Effective 1-1-65

Eff. 2-1-71,
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 Gallegos Canyon Unit | Lease No. 233 | Well No. 233 | Pool Name, including Formation Basin Dakota | Kind of Lease State, Federal or Fee Federal |
| Location | | | | |
| Unit Letter M | 990 | Feet From The South Line and | 790 | Feet From The West |
| Line of Section 27 | Township 28-N | Range 12-W | County San Juan | |

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) 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) Box 990, Farmington, New Mexico | | | | |
| If well produces oil or liquids, give location of tanks. | Unit M | Sec. 27 | Twp. 28-N | Rge. 12-W | Is gas actually produced? 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 <input checked="" type="checkbox"/> | Gas Well <input checked="" type="checkbox"/> | New Well <input checked="" type="checkbox"/> | Workover <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug Back <input type="checkbox"/> | Same Res'v. <input type="checkbox"/> | Diff. Res'v. <input type="checkbox"/> |
| Date Spudded 3/19/66 | Date Compl. Ready to Prod. 5/23/66 | | Total Depth 6156 | | P.B.T.D. 6120 | | | |
| Elevations (DF, RKB, RT, GR, etc.) (RKB) 5745 | Name of Producing Formation Dakota | | Top Oil/Gas Pay 5933 | | Tubing Depth 5983 | | | |
| Perforations 5976-5987, 5999-6003, 6038-6060, 6076-6083 | | | | | Depth Casing Shoe 6156 | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 12 1/4" | 8 5/8" | | 361 | | 200 | | | |
| 7 7/8" | 4 1/2" | | 6156 | | 1450 | | | |
| | 2 3/8" | | 5983 | | | | | |

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 3201 | Length of Test 3 Hours | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pitot, back pr.) Back Pressure | Tubing Pressure 259 | Casing Pressure 608 | 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
D. I. TOLLEFSON

Administrative Assistant

6/10/66

(Date)

D.I. TOLLEFSON

(Signature)

JUN 16 1966

OIL CON. COM.

Dist. 3

OIL CONSERVATION COMMISSION

APPROVED **JUN 16 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.

