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TRANSPORTER	OIL	/
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NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Eff. 2-1-71
Pan American Petro. Corp.
has changed its name to
AMOCO PROD. CO.

Form C-104

Supersedes Old C-104 and C-110

Effective 1-1-65

I.

Operator		PAN AMERICAN PETROLEUM CORPORATION	
Address		Security Life Building, Denver, Colorado	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<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
Gallegos Canyon Unit		239	Basin Dakota	State, Federal or Fee Federal
Location				
Unit Letter	H	1860	Feet From The North Line and 1120	Feet From The East
Line of Section	24	Township	28N	Range 13W , NMFM, 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.
	H	24
		28N
		13W
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'tv.	Diff. Res'tv.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
4-30-66	6-9-66	6259	6222					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
(RKB) 5795	Dakota	6147	6124					
Perforations	Depth Casing Shoe							
6149 69, 6096-6111								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	8 5/8"	339	215					
7 7/8"	4 1/2"	6259	1425					
	2 3/8"	6124						

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
2343	3 hours		
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
Back Pressure	188	772	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 SIGNATURE
H. M. SMITH

H. M. Smith

(Signature)

Administrative Assistant

(Title)

July 12, 1966

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 19 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

DEPTH	DEVIATION
340	1°
748	3/4°
1139	3/4°
1559	3/4°
1950	3/4°
2160	3/4°
2578	3/4°
2800	1°
3207	1°
3657	1°
3707	1°
4108	1°
4338	3/4°
4742	1 1/2°
5515	3/4°
5793	1°
6200	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 **Gallegos Canyon Unit Well #239** located **1860' FNL and 1120' FEL, Section 24, T28N, R13W, SE/4 of NE/4, San Juan County, New Mexico**

ORIGINAL SIGNED BY
Signed H. M. SMITH H. M. Smith
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 Administrative 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 13th day of July, 1966.

Ethelene H. Eckman
Notary Public

My Commission Expires: 3-12-67

