

NO. OF COPIES RECEIVED		5
DISTRIBUTION		
SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		
PRORATION OFFICE		

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 it
AMOCO PROD. CO.

I.

Operator	
Pan American Petroleum Corporation	
Address	
P. O. Box 480, Farmington, New Mexico	
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"/>
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
T. L. Rhodes "C"	SF 080844	3	Basin Dakota	State, Federal or Fee Federal
Location				
Unit Letter	B	1190	Feet From The North	Line and 2180
Line of Section		31	Township	28-N
Range		11-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 connected?
	B	31	28-N	11-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'tv.	Diff. Res'tv.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.			
9-1-66	10-16-66	6570'			6534'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			Tubing Depth			
6058' (RDB)	Dakota	6333'			6387'			
Perforations	Depth Casing Shoe							
6448-60', 6494-6506', 6370-6378', 6394-6402'	6570'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		359'		225			
7-7/8"	4-1/2"		6570'		1350			
	2-3/8"		6387'					

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
5469	3 hr.		
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
Back Pressure	440 psig	931 psig	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.

PAN AMERICAN PETROLEUM CORPORATION

ORIGINAL SIGNED BY
L. R. TurnerL. R. Turner
Administrative Clerk

(Signature)

(Title)

October 26, 1966

(Date)

OIL CONSERVATION COMMISSION

OCT 28 1966

APPROVED _____, 19

BY Original Signed by Linery 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.