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# NEW MEXICO OIL CONSERVATION COMMISSION

(Form C-104)  
Revised 7/1/57

Santa Fe, New Mexico

## REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well  
**RECOMPLETION**

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico,  
(Place)

March 5, 1964  
(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

**PAN AMERICAN PETROLEUM CORP.** **BELL FEDERAL GAS UNIT** Well No. 1, in **NW** 1/4 **NE** 1/4,  
(Company or Operator) (Lease) # **AN**  
**B**, Sec. **12**, T. **30N**, R. **13W**, NMPM., **Basin Dakota** Pool  
Unit Letter

San Juan

County. San Juan Date Spudded February 3, 1964 Date Drilling Completed 2-20-64  
Elevation 5834 (RDB) Total Depth 6642 PBTD 6604  
Top Oil/Gas Pay 6463 Name of Prod. Form. Dakota

Please indicate location:

D	C	B	A
		X	
E	F	G	H
L	K	J	I
M	N	O	P

PRODUCING INTERVAL 6536-44, 6555-59, 6576-80 with 2 shots per foot  
Perforations 6472-82 with 4 shots per foot

Open Hole None Depth 6642 Casing Shoe 6642 Depth 6475 Tubing

### OIL WELL TEST -

Natural Prod. Test: \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Choke Size \_\_\_\_\_

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Size \_\_\_\_\_

### GAS WELL TEST -

Natural Prod. Test: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_ Choke Size \_\_\_\_\_

Method of Testing (pitot, back pressure, etc.): \_\_\_\_\_

Test After Acid or Fracture Treatment: 2700 MCF/Day; Hours flowed 3

Choke Size 3/4" Method of Testing: Pitot tube

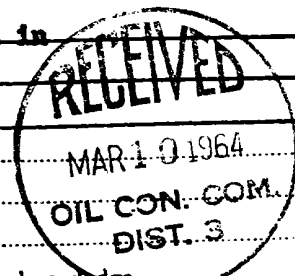
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand) 81,800 Gal. water and 60,000 lbs. sand.

Casing Press. 695 Tubing Press. 225 Date first new oil run to tanks Shut in

Oil Transporter Plateau Inc.

Gas Transporter El Paso Natural Gas Co.

Remarks: Completed March 3, 1964 as Basin Dakota Field Well  
Copies of Deviation Survey are attached.



I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved MAR 10 1964

**PAN AMERICAN PETROLEUM CORPORATION**  
(Company or Operator)

By: [Signature]  
(Signature)

Title Administrative Clerk

Send Communications regarding well to:

Name L. O. Spear, Jr.

Address Box 180, Farmington, New Mexico

**OIL CONSERVATION COMMISSION**

Original Signed By

By: A. R. KENDRICK

Title PETROLEUM ENGINEER DIST. NO. 3

TABULATION OF DEVIATION TESTS  
PAN AMERICAN PETROLEUM CORPORATION  
BELL FEDERAL GAS UNIT "A" NO. 1

DEPTH	DEVIATION
360'	1/4°
578'	1°
1134'	1°
1290'	1/2°
1915'	1°
2090'	3/4°
2590'	1/2°
2819'	1/2°
3124'	1-1/4°
3420'	1-1/4°
3895'	1°
4125'	1-1/4°
4445'	1-1/2°
4614'	1-1/4°
5071'	1-1/4°
5683'	1°
5883'	1°
6123'	3/4°
6553'	1°

A F F I D A V I T

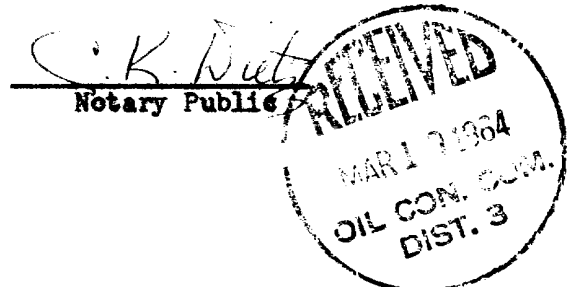
THIS IS TO CERTIFY that to the best of my knowledge the above tabulation details the deviation tests taken on PAN AMERICAN PETROLEUM CORPORATION'S Bell Federal Gas Unit "A" No. 1, Basin Dakota Field, located in the NW/4 NE/4 of Section 12, T-30-N, R-13-W, San Juan County, New Mexico.

Signed F. H. Hollingsworth  
Petroleum Engineer

THE STATE OF NEW MEXICO)  
  ) SS.  
COUNTY OF SAN JUAN            )

BEFORE ME, the undersigned authority, on this day personally appeared F. H. Hollingsworth known to me to be Petroleum Engineer for Pan American Petroleum Corporation and to be the person whose name is subscribed to the above statement, who, being 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 6th day of March, 1964.



My Commission Expires February 27, 1965.

