NO. OF COPIES RECEIVED		3	
DISTRIBUTION			
SANTA FE		1	
FILE		1	
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS	1	
OPERATOR		3	
PRORATION OFFICE		1	1
PRORATION OFF	ICE		<u> </u>
Operator	FICE	l	<u> </u>
Operator PAN AM		H Pl	LTI
Operator		H Pl	i i
Operator PAN AM Address	ERICA		
Operator PAN AM	RICA Sport	Dr:	Lve
PAN AM Address 501 Air	RICA Sport	Dr:	Lve
PAN AM Address 501 Air Reason(s) for filing	RICA Sport	Dr:	Lve

August 20, 1968

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

iffective 1-1-65	-110
STELL AND	

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS KLULIAED. AUG 22 1968 OIL CON. COM. OLEUM CORPORATION DIST. 3 , Farmington, New Mexico 87401 Other (Please explain) Change in Transporter of: Eff. 2-1-71, Oil Dry Gas Pan American Petro. Corp. charged its name to If change of ownership give name and address of previous owner ____ ANOGO EROD. CO. II. DESCRIPTION OF WELL AND LEASE
| Well No. | Pool Name, Including Formation Kind of Lease Lease No. State, Federal or Fee Lobato Gas Com "F" Blanco Pictured Cliffs Federal SF 078139 ; 1150 Feet From The North Line and 1590 Feet From The Township 30-1 9-W , NMPM, San Juan Line of Section 35 Range County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| Name of Authorized Transporter of Oil | or Condensate | | Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas 🔽 Address (Give address to which approved copy of this form is to be sent) El Paso Matural Gas Company Box 990, Farmington, New Mexico 87401
Is gas actually connected? When Unit When Twp. If well produces oil or liquids, give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well Workover Plug Back Same Res'v. Diff. Res'v. Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D. 7-1-68 ations (DF, RKB, RT, GR, etc.) 2452' 8-1-68 2516' Name of Producing Formation Top Oil/Gas F Tubing Depth GL 5706' RDB 5717' Pictured Cliffs 2403' 2392' Depth Casing 2403-18' x 2 SPF 2516' TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT HOLE SIZE CASING & TUBING SIZE DEPTH SET 8-5/8" 223' 225 12-1/4" 4-1/2" 7-7/8" 25161 800 23921 1-1/2" (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Tubing Pressure Casing Pressure Choke Size Length of Test Oil - Bbls. Water - Bbls. Actual Prod. During Test **GAS WELL** Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate 2336 (AGF 2632)
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size 3/4" Open Flow OIL CONSERVATION COMMISSION AUG 2 2 1968 VI. CERTIFICATE OF COMPLIANCE APPROVED I hereby certify that the rules and regulations of the Oil Conservation By Original Signed by Emery C. Arnold Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. SUPERVISOR DIST. #3 ORIGINAL SIGNED BY This form is to be filed in compliance with RULE 1104. G. W. Eaton, Jr. 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. (Signature) Area Engineer

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.



v. d