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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

AND
AUG 25 1967
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

(DEVIATION SURVEYS - BACK SIDE)

I. Operator
PAN AMERICAN PETROLEUM CORPORATION
Address
BOX 68, HOBBS, N. M. 88240

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name CATO "B" Federal	Well No. 4	Pool Name, including Formation CATO San Amaris	Kind of Lease State, Federal or Fee Fed	Lease No. NM-0177517
Location Unit Letter <u>M</u> ; <u>660</u> Feet From The <u>SOUTH</u> Line and <u>660</u> Feet From The <u>WEST</u>				
Line of Section <u>14</u> Township <u>8-S</u> Range <u>30-E</u> , NMPM, <u>CHAUES</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> SCURLOCK OIL CO.	Address (Give address to which approved copy of this form is to be sent) 414 MID AMERICA BLDG MIDLAND					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 14	Twp. 8	Rge. 30	Is gas actually connected? NO	When

If this production is commingled with that from any other lease or pool, give commingling order number: CTB-171

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 7-11-67	Date Compl. Ready to Prod. 7-21-67	Total Depth 3670'	P.B.T.D. 3642'					
Elevation (DF, RKB, RT, GR, etc.) 4170'	Name of Producing Formation San Amaris	Top Oil/Gas Pay 3503	Tubing Depth					
Perforations 3503-34, 55-3604			Depth Casing Shoe 3670					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		285'		250'Sx			
7 7/8"	4 1/2"		3670'		300'Sx			

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 7-21-67	Date of Test 7-24-67	Producing Method (Flow, pump, gas lift, etc.) FLOW		
Length of Test 24	Tubing Pressure 250	Casing Pressure -	Choke Size 12/64"	
Actual Prod. During Test 360	Oil - Bbls. 288	Water - Bbls. 72	Gas - MCF 138 (Goel 480)	

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

0+3-NMOCC-14
1-NSW
1-W.E.F
1-SUSP
1-RRY

(Signature) _____
AREA SUPERINTENDENT

(Title)

(Date) 7-25-67

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY _____

TITLE _____

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

DEVIATION SURVEYS

<u>DEPTH</u>	<u>DEGREES OFF</u>
285	1/2
749	1/2
1610	1 1/4
1711	1 -
2222	3/4
2581	1 1/4
2980	"
3220	3/4
3393	"
3558	1 -

The above are true to the best of my knowledge.

Sworn to this date, the 25th day of July, 1967.

D. J. Markwood
Notary Public In & For Lea Co. N. M.
My Commission expires 6-18-68