----DISTRIBUTION SANTA FE

- FRRY

(Date)

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

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

FILE		1		AND				
U.S.G.	S.		AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL (GAS			
LAND	AND OFFICE							
7.00	OIL		(DEVIATION SURVEYS · BACK SIDE)					
IHAN	SPORTER GAS		(DEVIHITON SUR	SUEAZ, DHOK 21DE	/			
OPER	ATOR			•				
	ATION OFFICE	1-1-1						
Operato								
DAN A	MERICAN PETROL	FUM CORP	ORATION					
Address			<u> </u>					
BOX 6	8, HOBBS, N. M.	88240						
Region	s) for filing (Check	proper box)		Other (Please explain)				
New We			Change in Transporter of:		1			
Recomp	75		Oil Dry Gas					
1 '			Casinghead Gas Condens	ate 🗍				
Change	in Ownership		<u> </u>					
If chang	ge of ownership gi	ve name						
and add	ress of previous o	wner		A TIT				
			FASE - UNDESIGN	ATED porth Bagley-Lou	ver Pennsylvanian			
	RIPTION OF WE	LL AND L	Well No. Pool Name, Including Fo		Lease No.			
57/	STATE DH 2 BAGLEY, NORTH LOWER FERVISIATE, Federal or Fee STATE 202.							
	716 0		LA CHOLE !!! TOK!!					
Locatio	~~ ~~	60	5_ Feet From The SOUTH Line	360 Fast From	The EAST			
Unit	Letter	-: <u>-00</u> 0	Feet From The JUUI H Line	1 667 1011				
	, D 1	₩	nahin II-S Range	33-E , NMPM, LEA	County			
Line	of Section	l'owi	nship S Hange					
	NIATEON OF THE	ANCDODT	ER OF OIL AND NATURAL GAS	5				
II. DESIG	Authorized Transp	orter of Oil	or Condensate	Address (Give address to which appro	oved copy of this form is to be sent)			
	ALERICANI BETDO	ELIM COD	PORATION (TRUCKS)	BOX 1725 MIDLAND, TO	2 xA 5			
PAN. A	MERICAN PETRO	corter of Cast	or Dry Gas	Address (Give address to which appro	oved copy of this form is to be sent)			
Name	n Addition Sed Transf				j			
			Unit Sec. Twp. Ege.	Is gas actually connected? W	hen			
If well	produces oil or liqu	ids,	T 21 11 33	No				
1 -	cation of tanks.			i line and a number				
		mingled with	h that from any other lease or pool,	give comminging order number.				
IV. COMP	LETION DATA		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.			
De	signate Type of	Completio		×				
			Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	pudded		3 20 6 7	10103	10028			
	<u>2-16-67</u>		Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
Elevat	ions (DF, RKB, RT,	GK, etc.)	LOWER PENN	9893				
4	276' R.D	· D	NWEK PEINN		Depth Casing Shoe			
Perfor		000-	52 01 00		10103			
480	12-4864)	4463	-53 94-98	CEMENTING RECORD				
			CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	HOLE SIZE		1	385'	300			
<u> </u>	15"		113/4 85/8"	3830'	520			
				10103	600			
	7 7/8"		5'/2"					
L				for any and sold values of load of	il and must be equal to or exceed top allow-			
V. TEST	DATA AND RE	QUEST F	OR ALLOWABLE (Test must be a able for this de	pth or be for full 24 hours)				
OIL V	VELL First New Oil Run T	a Tonka	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)			
Date F		_	3-22-67	Surale & Flow	•			
<u></u>	3-20-6	<u>' </u>	Tubing Pressure	Casing Pressure	Choke Size			
Lengt	h of Test			_				
			Oil-Bbls.	Water - Bble.	Gas-MCF			
Actua	Prod. During Test		120	360	NA			
	480		120					
	WELL		Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
Actua	I Prod. Test-MCF/	ט	Tankin or rear					
	— (C. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10	ak ne i	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size			
Testi	ng Method (pitot, ba	ck pri/	Towns Company					
			<u> </u>	OIL CONSERV	ATION COMMISSION			
VI. CER	TIFICATE OF C	OMPLIAN	CE ·	OIL CONSERV				
				APPROVED, 19				
I here	by certify that the	rules and	regulations of the Oil Conservation					
			with and that the information given a best of my knowledge and belief.	BY A Amil				
above	is true and com	Mara to rui	<u> </u>					
		\ \		TITLE	10 TO			
				This form is to be filed in	n 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				
		/Sien	ature)	well, this form must be accome tests taken on the well in accome				
0+3-1	vmocc-H	(a+Su	AREA SUPERINTENDENT	tests taken on the well in acc	must be filled out completely for allow			
	VSW WEF	/T	itle)	I while on new and recompleted	Marie.			
1-	SUSP	, 4 '	**** 3-23-67	must a sales Continue I	II. III, and VI for changes of owner,			
•	•			- I Particular (F. 1817)	COLOR OF VINEL WILL CHEUSE OF COURTINO			

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 complet d wells.

DEVIATION SURVEYS

DEPTH	DEGREES	DEPTH DEGREES
415-	1 3/4	385 - 1/4
1444 -	1/2	840 - 1/2
2050 -	2/3/4	1285 - Yu
21/19 -	3(1756 - 72
23/10 -	21/4	22 <i>6</i> 0 - 3/4
3067 -	N/A	2470 - 2-
3490 -	2 8/4	2800 - 1/2
3540 -	2	3401 - 1/4
37)7 -	2{	3700 - 1 =
38B& -	Νģ	3830 - 74
4256 -	134	4330 - 1/2
4642 -	• 5 `	4950 - "
40173 -	2/4	5373 - /4
2760 -	21°	5793 - 17,

NO. OF COPIES RECEIVED									
DISTRIBUTION	DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION								
SANTA FE	Effective 1-1-65								
FILE		To the state of th							
U.S.G.S.	State X Fee								
LAND OFFICE			5, State Oll & Gas Lease No.						
OPERATOR	5. State Cit & Gat. E-also (16)								
			min Harrish						
SUNDE	Y NOTICES AND REPORTS ON WELL	LS A DIFFERENT RESERVOIR.							
	ION FOR PERMIT -" (FORM C-101) FOR SUCH PROP	DSALS.)	7, Unit Agreement Name						
1. OIL [V] GAS [
2. Name of Operator	OTHER.		8, Farm or Lease Name						
PAN AMERICAN PETROLEUM CO	DDOD ATION		STATE DH						
3. Address of Operator	AF ORATION		9. Well No.						
			2.						
BOX 68, HOBBS, N. M. 88240			10. Field and Pool, or Wildcat						
1 1 2 2 2	60 PEET FROM THE SOUTH LIN	IE AND 660 FEET FRO	UPILLED GIOLANIES PEI						
UNIT LETTER,	PEET PROM THE SOUTH LIN	-							
THE EAST LINE, SECTI	21 11-5	RANGE 33-E NMP							
THE HST LINE, SECTI	DN TOWNSHIP	NANUE							
	15. Elevation (Show whether DF, R'	T, GR, etc.)	12. County						
			LEA MILLINI						
16. Check	Appropriate Box To Indicate Nature	of Notice, Report or O	ther Data						
	NTENTION TO:		IT REPORT OF:						
PERFORM REMEDIAL WORK	PLUG AND ABANDON REME	EDIAL WORK	ALTERING CASING						
TEMPORARILY ABANDON	i	MENCE DRILLING OPNS.	PLUG AND ABANDONMENT						
PULL OR ALTER CABING	CHANGE PLANS CASI	NG TEST AND CEMENT JOB	a hun attained						
	o	NG TEST OD CEMENT 198	aupercuorsx						
OTHER		•	·						
AB Describe Description of Completed C	perations (Clearly state all pertinent details, as	nd give pertinent dates, includir	ng estimated date of starting any proposed						
TD-10103. On 3	3-17-67, 5½°0D 15.5.	- // - / 4-00 4 J	-55 casing was						
	1 600 sx Cement. In								
30 minuiles De	4 Ob alter NOC	. appy 52 h	ours perforated						
it a second	4 Ok. after NOC	Wasa & Budi	1 1 W 5000 sal						
	899, 9923-53, 94-98 u	TESPT. addag	The 19 cost of 12						
28%. Evaluate		_	0						
On PT. Swat an	On PT. Swat and Flow 120 Box 860 BW in 24 hours. Cgr. 46 Est)								
NO-BOL.									
	4								
TD, 10103' Comj. 2-22-67. PAD, 10028'									
TPAY- 9893 - L. lensu.									
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.									
		1	, , , , , , , , ,						
SIGNED	TITLE (IN	ea Supi	- DATE 3-23-67						
0.2 4/0.22		/							
0+2·NMO((·H	46								
APPROVED BY	DATE								
CONDITIONS OF APPROVAL, IF AN	CONDITIONS OF APPROVAL, IF ANY:								
rrky /									
/									