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OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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

Santa Fe, New Mexico

REQUEST FOR (OIL) - ~~WELL~~ ALLOWABLE

(DEVIATION SURVEYS ON BACK SIDE)

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 QUADRUPLICATE 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.

Hobbs, New Mexico

September 23, 1964

(Place)

(Date)

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

Pan American Petroleum Corporation USA Russell Norton Well No. 17, in NE 1/4 SE 1/4,
(Company or Operator) (Lease)

I, Sec. 30, T. 8-S, R. 35-E, NMPM, Milnesand San Andres Pool
Unit Letter

Roosevelt

County. Date Spudded 9-7-64

Date Drilling Completed 9-17-64

Please indicate location:

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

Elevation 4222' REB

Total Depth 4774'

PBTD 4772'

Top Oil/Gas Pay 4723'

Name of Prod. Form. San Andres

PRODUCING INTERVAL -

Perforations 4723'-46' W/2 JSPT

Open Hole

Depth

Depth

Casing Shoe 4774'

Tubing 4766'

OIL WELL TEST -

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

Test After Acid Treatment (after recovery of volume of oil equal to volume of load oil used): 38 bbls. oil, 22 bbls. water in 9 hrs, _____ min. Size Sub & FLW

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: _____ MCF/Day; Hours flowed _____

Choke Size _____ Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 750 gal acid

Casing Press. _____ Tubing Press. _____ Date first new oil run to tanks 9-21-64

Oil Transporter Magnolia Pipe Line Co.

Gas Transporter Sinclair Oil & Gas Co.

Remarks:

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

Approved _____, 19_____

Pan American Petroleum Corporation

(Company or Operator)

Original Signed by

By: V. E. STALEY

(Signature)

By: _____

Title: Area Superintendent

Send Communications regarding well to:

Name: V. E. Staley

Address: Box 68 - Hobbs, New Mexico - 88240

OIL CONSERVATION COMMISSION

Title: _____

DEVIATION SURVEYS

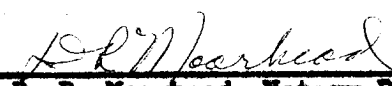
<u>DEPTH</u>	<u>DEGREES OFF</u>
405	1/4
816	1/2
1248	1/4
1653	1/2
1932	1-1/4
2356	1-1/2
2837	1/2
3230	3/4
3500	1-1/2
3822	1/2
4276	1/2
4431	3/4
4754	1/2

The above are true and correct to the best of my knowledge and belief.


V. E. Staley - Area Superintendent

Sworn & Subscribed to this date, the 23rd of September, 1964.

6-18-68
My Commission Expires


D. R. Moorhead, Notary Public in and for
Lea County, New Mexico