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NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

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

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

(Deviation Surveys on Backside)

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 November 30, 1964

(Place)

(Date)

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

Pan American Petroleum Corp. USA Russell E. Horton, Well No. **25**, in **SE** $\frac{1}{4}$ **NW** $\frac{1}{4}$,

(Company or Operator)

(Lease)

F, Sec. **29**, T. **8-S**, R. **35-E**, NMPM, **Milnesand San Andres** Pool

Unit Letter

Roosevelt

County. Date Spudded **11-17-64**

Date Drilling Completed **11-25-64**

Please indicate location:

Elevation **4218' RDB**

Total Depth **4716'** PBT **4714'**

Top Oil/Gas Pay **4687'**

Name of Prod. Form. **San Andres**

PRODUCING INTERVAL -

Perforations **4687-4705' W/2 JSPT**

Open Hole _____ Depth _____ Casing Shoe **4716'** Depth Tubing **4708'**

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 load oil used): **40** bbls. oil, **0** bbls water in **8** hrs, _____ min. Choke Size **2 1/4"**

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. **400** Tubing Press. **80** Date first new oil run to tanks **11-29-64**

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

Original (Signed By Operator)

O. R. WILLIAMS, JR.

By: _____ (Signature)

Title **Area Foreman**

Send Communications regarding well to:

Name **O. R. Williams, Jr.**

Address **Box 68 - Hobbs, New Mexico**

OIL CONSERVATION COMMISSION

By: _____

Title _____

DEVIATION SURVEYS

<u>DEPTH</u>	<u>DEGREES OFF</u>
402	1/4
700	3/4
1276	1
1680	1
2011	1/2
2494	1/2
3013	3/4
3495	3/4
3613	1/2
3938	1-1/2
4183	1
4390	1
4652	1/2
4716	1/4

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

O. R. Williams, Jr.
O. R. Williams, Jr. - Area Foreman

Sworn to this date, the 30th day of November, 1964.

6-18-64
My Commission Expires

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