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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

Operator <i>San American Petroleum Corp.</i>	
Address <i>Box 68, Hobbs, New Mexico</i>	
Reason(s) for filing (Check proper box)	
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 <i>J.F. FARRELL-USA</i>	Well No. <i>13</i>	Pool Name, including Formation <i>CHAUERCOO SAN ANDRES</i>	Kind of Lease State, Federal or Fee <i>FED</i>
Location			
Unit Letter <i>D</i>	<i>660</i>	Feet From The <i>NORTH</i>	Line and <i>660</i> Feet From The <i>WEST</i>
Line of Section <i>28</i>	Township <i>7-S</i>	Range <i>33-E</i>	NMPM, <i>ROOSEVELT</i> County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)		
<i>MAGNOLIA PIPE LINE Co.</i>	<i>Box 900 DALLAS, TEXAS</i>		
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	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 <i>J</i>	Sec. <i>28</i>	Twp. <i>7</i> Rge. <i>33</i>
	Is gas actually connected?		When
	<i>No</i>		

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well ☒	Gas Well ☐	New Well ☒	Workover ☐	Deepen. ☐	Plug Back ☐	Same Res'v. ☐	Diff. Res'v. ☐
Date Spudded <i>1-31-66</i>	Date Compl. Ready to Prod. <i>2-11-66</i>		Total Depth <i>4448'</i>		P.B.T.D. <i>4414'</i>			
Pool <i>CHAUERCOO</i>	Name of Producing Formation <i>SAN ANDRES</i>		Top Oil/Gas Pay <i>4246'</i>		Tubing Depth <i>4402'</i>			
Perforations <i>4246-47, 49-51, 53-54, 62-66, 73-74, 82-84, 85-86, 90-91, 98-99</i>					Depth Casing Shoe <i>4448'</i>			
<i>4301-02, 08-10, 14-15, 17-18, 22-25, 72-74, 80-81, 83-84, 86-88</i>								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<i>11"</i>	<i>8 5/8"</i>		<i>417'</i>		<i>250</i>			
<i>7 7/8"</i>	<i>4 1/2"</i>		<i>4448'</i>		<i>800</i>			
	<i>2 3/8"</i>		<i>4402'</i>					

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 <i>2-11-66</i>	Date of Test <i>2-27-66</i>	Producing Method (Flow, pump, gas lift, etc.) <i>PUMP</i>	
Length of Test <i>24</i>	Tubing Pressure <i>—</i>	Casing Pressure <i>—</i>	Choke Size <i>—</i>
Actual Prod. During Test <i>85</i>	Oil-Bbls. <i>83</i>	Water-Bbls. <i>2</i>	Gas-MCF <i>62 (GOR 75%)</i>

GAS WELL

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

04 2-A MOCC- N

1-JOB

1-Sub

1-Well

1-Location

1-Transporter

1-Operator

1-Prorator

1-Commissioner

1-Commissioner

1-Commissioner

1-Commissioner

1-Commissioner

1-Commissioner

1-Commissioner

(Signature)

(Title)

(Date)

Area Supv

2-28-66

OIL CONSERVATION COMMISSION

APPROVED

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 deviated 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 Sections I, II, III, and IV only for change of owner, well name, or number, or transporter or other such change of data.

DEVIATION SURVEYS

DEPTH	DEGREES OFF
410 -	1/4
2320	1 1/2
2140	2 -
3626	1 1/4
3880	1 -
4040	3/4
4307	1/2
4395	1/4

The above are true to the best of my knowledge.

Area Supt.

I swear to this date, the 28th day of February, 1966.

SR MacLeod
Notary Public Int for Lea Co - N.M.

My Commission Expires 6-18-68.