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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

HOBBS OFFICE O. C. C.
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

(DEVIATIONS- BACK SIDE)

I. OPERATOR
San American Petroleum Corp.
Address: Box 68, Hobbs, New Mexico 88240
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	Well No.	Pool Name, Including Formation	Kind of Lease
Emma L. Coleman "B"	2	Chaveroo-San Andres	State, Federal or Fee
Location	Chaveroo-San Andres R-3056		
Unit Letter	D	660 Feet From The	NORTH Line and 660 Feet From The WEST
Line of Section	24	Towship	7-S Range 33-E, NMPM, ROOSEVELT 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)					
The Permian Corp (Trucks)	Box 3119, Midland, Texas					
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	Sec.	Twp.	Range	is gas actually connected?	When
	E	24	7	33	No	

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.
	X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth	P.B.T.D.				
3-24-66	4-5-66		4342'	4309'				
Pool	Name of Producing Formation		Top Oil/Gas Pay	Tubing Depth				
CHAUEROO	San Andres		4111'	4285'				
Perforations	4111-15, 20-24, 38-48, 54-58, 61-63, 69-71, 85-90, 95-99, 4209-10, 46-53, 69-71, 77-79 w/2JSPT.			Depth Casing Shoe				
				4342'				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
4-5-66	4-15-66	FLOW	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24	300	1150	18/64
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
150	150	0	93 (608-620) (92-25.5)

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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.

OV 3-NMOCC-H
1-JWB
1-OBP
1-SH
1-RE
1-KH
1-TR

(Signature)
C. W. Supr
(Title)
4-18-66
(Date)

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 Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.
Supersede Form C-104 must be filed for each well in a pool.

<u>DEVIATIONS</u>	
	<u>DEGREES</u>
<u>DEPTH</u>	<u>OFF</u>
476	1/4
1426	3/4
2331	1 3/4
2829	2 1/4
3254	2 1/4
3551	1 1/4
3795	1 1/4
3968	1 -
4250	3/4

The above are true to the best of my knowledge.

Area Superintendent

Sworn to this date, the 18th day of April, 1966



J. D. Mearns
 Notary Public in & for Lea Co. N. M.
 My Commission expires 6-18-68