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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

SEP 26 1966

Operator American Trading and Production Corporation	
Address P. O. Drawer 992, Midland, Texas	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of ownership give name and address of previous owner	

II. DESCRIPTION OF WELL AND LEASE				
Lease Name New Mexico State "20"	Well No. 1	Pool Name, including Formation Chaveroo San Andres	Kind of Lease State, Federal or Fee State	Lease No. OG-930
Location Unit Letter L ; 660 Feet From The West Line and 1980 Feet From The South				
Line of Section 20 Township 7S Range 34E , NMPM, Roosevelt County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
McWood Corporation	2003 Wilco Building, Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 K	Sec. 20	Twp. 7S	Rge. 34E	Is gas actually connected? No	When

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.	
Date Spudded Aug. 31, 1966	Date Compl. Ready to Prod. Sept. 15, 1966	Total Depth 4500'		P.B.T.D. 4461'					
Elevations (DF, RKB, RT, GR, etc.) 4326 RKB	Name of Producing Formation San Andres		Top Oil/Gas Pay 4123'		Tubing Depth 4133'				
Perforations One hole each level: 4244, 4241, 4237, 4233, 4227, 4213, 4207, 4195, 4181, 4169, 4141, 4126, 4123.					Depth Casing Shoe 4496'				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	8 5/8"		422'		300 Sacks Incor (Circ.)				
7 7/8"	4 1/2"		4496'		450 Sacks Incor				
	2" EUE		4133'						

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 Sept. 15, 1966	Date of Test Sept. 21 - Sept. 22	Producing Method (Flow, pump, gas lift, etc.) Natural flow	
Length of Test 15 hours	Tubing Pressure 220	Casing Pressure 925	Choke Size 20/64"
Actual Prod. During Test 178 B.O.	Oil-Bbls. 178	Water-Bbls. 0	Gas-MCF 96.2 - 15 hours

Daily Rate 154 MCF/day

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED SEP 26 1966	
Bill J. Graham (Signature) Division Engineer		BY Joe R. Ames	
Sept 26 1966 (Date)		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 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 must be filed for each well in multiply completed wells.	

INCLINATION REPORT

New Mexico State "20" #1  
SW/4 - SW/4 Sec. 20, T-7-S, R-34-E

<u>Depth</u>	<u>Deviation</u>
423'	1°
907'	1 1/2°
1394'	3/4°
1730'	1°
2145'	3/4°
2639'	1°
2705'	3/4°
3226'	1°
3519'	3/4°
3775'	1°
3930'	3/4°
4418'	1 1/4°
4500'	1 1/4°

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

Signed Bill J. Graham  
Bill J. Graham  
Title Division Engineer

Subscribed and sworn to before me this 21st day of September, 1966

Alvin B. Scott  
Notary Public  
Midland County, Texas