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U.S.G.S.	
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

< DEVIATION SURVEYS - BACK SIDE >

I. OPERATOR

Operator	NAME CHANGED: FROM: PAN AMERICAN PETR. CORP. TO: AMOCO PRODUCTION CO. EFFECTIVE: 2-1-71
Address	
BOX 68, HOBBS, N. M. 88240	
Reason(s) for filing (check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	REQUEST TEMP AUTHORITY TO COMMINGLE
Recompletion <input type="checkbox"/>	OLE PROD. INTO TODD STORAGE SYSTEM
Change in Ownership <input type="checkbox"/>	W/ PETERSON A FED. & SPRADLEY FED. LEASES
	PENDING SUBMISSION & APPROVAL OF
	FORMAL APPLICATION.

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	Lease No.
SOLSBERY Federal Oil Com	1	TODD-LOWER SAN ANDRES	State, Federal or Fee FED	NM-050476
Location	Unit Letter	Feet From The	Line and	Feet From The
	P	660	SOUTH	660
			EAST	
Line of Section	29	Township	7-S	Range
			36-E	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)					
MOBIL PIPE LINE CORP.	Box 900 DALLAS 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	Sec.	Twp.	Rge.	Is gas actually connected?	When
	M	29	7	36	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		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
12-14-69	12-24-69	4363'	4346'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
4137' RDB	SAN ANDRES	4305'	4320'					
Perforations			Depth Casing Shoe					
4305'-4319'								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	8 5/8"	330'	250					
7 7/8"	4 1/2"	4363'	300					

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.)	
12-25-69	12-29-69	SUIAB & FLOW	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24		320	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
134	134	0	NEG

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

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.

043-NMOC-C-11
1-NSW
1-OBP
1-JEL
1-SUSP
1-RRY

(Signature) AREA SUPERINTENDENT
(Title)
(Date) DEC 29 1969

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 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 C-104 must be filed for each pool in multiply completed wells.

DEVIATION SURVEYS

<u>DEPTH</u>	<u>DEGREES</u>
330	1°
843	1 -
1360	3/4
1820	1 -
2119	1 -
2615	3/4
3123	1 1/2
3529	1 -
3768	1 1/4
3966	1 1/2
4156	1 -

The above are true to the best of my knowledge.

Sworn to this date,

L. K. Mearns
Notary Public In & for Lea Co. N. M.
My Commission Expires 6-18-72