	NO. OF COPIES RECEIVED				
	DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSION	Form C-104	
	SANTA FE	REQUEST FOR ALLOWARD F HUBBLE Superseder Old Colds and Col			
	AND U.S.G.S. LAND OFFICE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS 30 AH '67				
	LAND OFFICE	- AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS IN AN 107	
	OPERATOR Deviation Surveys - Back Side				
I.	PRORATION OFFICE				
	Operator PAN AMERICAN PETROLEUM CORPORATION				
	Address				
	BOX 68, HOBBS, N. M. 88240 Reason(s) for filing (Check proper box		Other (Please explain)		
	New Well	Change in Transporter of:	Unit (rieuse explain)	ł	
	Recompletion	Oil Dry G	as 🔲		
	Change in Ownership	Casinghead Gas Conde	enscite		
	If change of ownership give name and address of previous owner	······································			
XI.	II. DESCRIPTION OF WELL AND LEASE UNDESTIGNATED Cato-San Andres Lease Name FISCHER FEDERAL 2 CATO San Guards () State, Federal or Fee Jed No.				
	Location	CHIO OWN C	where s is the second s	520 0254700	
	Unit Letter;	Feet From The NORTH_LI	ne and <u>660</u> Feet From	The WEST	
	Line of Section 12 To	waship 8-5 Range	30-E, NMPM, CH	AUES County	
m.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	IS		
	Name of Authorized Transporter of Oil		Address (Give address to which appro	ved copy of this form is to be sent)	
	Name of Authorized Transporter of Car	singhead Gas or Dry Gas	Address (Give address to which appro		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.		en	
1		$1 \cup 14 \cup 0 : 50$	I INO	no buth in CATO	
IV.]	COMPLETION DATA				
	Designate Type of Completic	on = (X) Oil Well Gas Well X	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	1-11-67	1-22-67	3706	3610	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations	San andres		Depth Casing Shoe	
	3550-95 W/25	PF		3706	
	HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD	SACKS CEMENT	
	110	8 5/8	460	300	
	7.78	4 1/2"	3706'	800	
v .	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow-	
ĩ	OIL WELL able for this depth or be for full 24 hours) Date First New Oil Run To Tanks Date of Test Producting Method (Flow, pump, gas lift, etc.)				
	1-26-67	3-15-67	Pump		
[Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
ŀ	Actual Prod. During Test	Oil-Bbis.	Water - Bble.	Gas - MCF	
l	42	//	31 BLW	3	
	CAC WET Y	GAS WELL			
Γ	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			
	reening Method (phot, back ph.)	I uping Pressure (Bnut-18)	Cosing Pressure (Shut-in)	Choke Size	
VI. (CERTIFICATE OF COMPLIANC	CE .	OIL CONSERVA	TION COMMISSION	
I hereby certify that the rules and regulations of the Oil Conservation			APPROVED		
•	Commission have been complied w bove is true and complete to the	ith and that the information given	HSY		
•					
n / '	B-NMOCC-11				
			This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened		
7	WEF (Signature)		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
L	- JEL AREA SUPERINTENDENT - SUSD (Title) - RRY 3-16-67		All sections of this form must be filled out completely for allow- able on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of owner,		
1					
l	(Dat		well name or number, or transport	er, or other such change of condition.	
			Separate Forms C-104 must be filed for each pool in multiply completed wells.		

Deviation Surveys dipth Diques 930 - 1/4 1422 - ½ 1756 - ¾ 1900 - 1-2392 - 1 -2455 /v 2833 /4 3329 1/2 3530 1/~ The above are true to the best of my knowledge. Sworn to this date, march 16 4 1967. Notary Sublic In E Dor Lea Co hm My Commission ekpine 6-18-68 · · · ·