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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION, C.
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
(DEVIATION SURVEYS ON BACK SIDE)

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

Operator PAN AMERICAN PETROLEUM CORPORATION	
Address BOX 68, HOBBS, N. M. 88240	
Reason(s) for filing (Check proper box)	
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"/>
Other (Please explain) REQUEST AUTHORITY TO TEMPORARILY COMMINGLE W/CATO B9 AND PRODUCTION	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE		UNDESIGNATED		Cato-San Andres	
Lease Name CATO "C" Federal	Well No. 1	Pool Name, including Formation (CATO San Andres 271)	Kind of Lease State, Federal or Fee Federal	Lease No. NM 0444628	
Location					
Unit Letter J	1980	Feet From The South	Line and 1980	Feet From The East	
Line of Section 14	Township 8-S	Range 30-E	NMPM, Chaves	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"/> SCURLOCK OIL Co. (Trucks)	Address (Give address to which approved copy of this form is to be sent) 414 MIDAMERICA BLDG MIDLAND					
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 J	Sec. 14	Twp. 8-S	Rge. 30-E	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 <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>		
Date Spudded 1-20-67	Date Compl. Ready to Prod. 2-1-67	Total Depth 3660	P.B.T.D. 3570'
Elevations (DF, RKB, RT, GR, etc.) 4158' RDB	Name of Producing Formation San Andres	Top Oil/Gas Pay 3497'	Tubing Depth
Perforations 3497-3544 w/2JSPF	Depth Casing Shoe 3660'		
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE 11"	CASING & TUBING SIZE 8 5/8"	DEPTH SET 470	SACKS CEMENT 300 2x
7 7/8"	4 1/2"	3660'	800 2x

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 2-1-67	Date of Test 2-5-67	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 15	Tubing Pressure 200	Casing Pressure 60	Choke Size 20/64
Actual Prod. During Test 206	Oil-Bbls. 206	Water-Bbls. 0	Gas-MCF 84 (GOR 408 eq 25.9)

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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-N
1-NSU
1-Bill Farmer
1-PAVCO BOX 1725, MID (Signature)
1-SUSP
1-RRY
(Title)
2-7-67
(Date)
AREA SUPERINTENDENT

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

1456 - 3/4
1930 - 1 -
2250 - 1 -
2748 - 1/4
3090 - 1/4
3660 - 1 -

The above are true to the best of my knowledge

2-7-67

AREA SUPERINTENDENT

Sworn to this date, the 7th day of Feb. 1967.



D. D. Moorehead
Notary Public, San Juan Co. N.M.
My Commission Expires 6-18-68.

TO NMCC:

Request authority to temporarily commingle
CATO C Federal and CATO B Federal lease production
into a common battery which will be located on
the CATO C Federal Lease 4d in Unit J, Sec 14, T-8-S,
R-30-E, Chaves County, N.M., CATO San Andres
Oil Pool. Formal application for commingling
is being prepared.

At present, both leases are shut-in for the CATO
San Andres Oil Pool Entering into Unit.

2-7-67

AREA SUPERINTENDENT

PAN AMERICAN PETROLEUM CORPORATION