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╞	NO. OF COPIES RECEIVED				
ŀ	SANTA FE		NSERVATION COMMISSION	Form C-104 E. Supersedes Old C-104 and C-110	
ł	FILE		AND - Heille	. Effective 1-1-65	
	U.S.G.S.	AUTHORIZATION TO TRAN	SPORT OIL AND NATURALIO	ASH 167	
	LAND OFFICE			• • • • • •	
	TRANSPORTER GAS GAS	(DEVIATION S	URUEVS-BACK SID	£)	
	OPERATOR			-	
1.	PRORATION OFFICE	<u> </u>	· · · · · · · · · · · · · · · · · · ·		
	PAN AMERICAN PETROLEUM C	ORPORATION			
	Address				
	BOX 68, HOBBS, N. M. 88240		Other (Please explain)		
	Reason(s) for filing (Check proper box) New Well	Change in Transporter of:	DEALERT HERMIC	SION TO TEMP. COMMINGLE	
		Oil Dry Gas		ATO STORAGE SYSTEM III .	
	Change in Ownership	Casinghead Gas Condens		EPARATELY. D BEING BUB MITTED	
,	If change of ownership give name		FORMAL APPLICATION	o period gog minica	
	and address of previous owner				
11 .	II. DESCRIPTION OF WELL AND LEASE				
	Lesse Name	Well No. Pool Name, Including For	state, Federal		
	CROSBY "A" Jederal CATO san Undres 202) state, received of ree JEd 6142235				
	Unit Letter P_; 660	Feet From The South Line	and <u>660</u> Feet From T	The EAST	
	Line of Section 8 Township 8-S Range 30-E, NMPM, CHAVES County				
111.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address to which approv	ad some of this form is to be sent)	
	Name of Authorized Transporter of Oil	or Condensate	Address (Give Balless to Milen approv		
	Name of Authorized Transporter of Cas		<u>AIA MID AMERICA BLDG</u> Address (Give address to which approv	ved copy of this form is to be sent)	
	Nume of Autorized Transports at 2			· · · · · · · · · · · · · · · · · · ·	
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	is gas actually connected? Whe	in the second	
	give location of tanks.	# 10 8 30			
IV	If this production is commingled with that from any other lease or pool, give commingling order number:			Dente Dette Dette Dette	
	Designate Type of Completio	n = (X) Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Date Spudded	3-2-67	3414'	33.67	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	4064 R.D. B.	San Undres	3158	Depth Casing Shoe	
	Perforations 3158-3200, 3232-68, 3308-47		3414		
	5156-5200, SEJE	TUBING, CASING, AND	CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	470 '	SACKS CEMENT	
	7 1/8"	8 5/8	3414'	800	
	1.78	<u> </u>			
V	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed to able for this depth or be for full 24 houre)				
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	Producing Method (Flow, pump, gas lift, etc.)	
	3-2-67	3-8-67	JLOW Casing Pressure	Choke Size	
	Length of Test		525	12/64	
	Actual Prod. During Test	Oil-Bble.	Water-Bbls.	Gas-MCF	
	144	124	20 BLW	1.14	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
			Casing Pressure (Shut-in)	Choke Size	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Bude-22)		
	I. 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.		OIL CONSERVATION COMMISSION		
VI					
			APPROVED , 19, 19,		
			84		
			TITLE		
~	m		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 allow- able on new and recompleted wells.		
	<				
	I-BF (TI	AREA SUPERINTENDENT			
	I-JEL	3-9-67	Tutt out only Regulars T	II, III, and VI for changes of owner, rier, or other such change of condition.	
I-SUSP (Date) well no			Separate Forms C-104 mut	at be filed for each pool in multiply	
	I-RRY		completed wells.		

(JUIATIONS

DEPTH	DEGREE OFF
470 - 962 - 1474 -	1/2 3/4
1960 -	2/4
2033 -	3/2
2630 -	2 -
3042 -	1 1/2

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The above are true to the best of my knowledge.

AREA SUPERINTENDENT

Sworn to this date, the 9th day of March, 1967. Notary Aublie In & You Rea Co. n. m. My commission expires 6-18-68.