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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  
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:		Other (Please explain)	
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: GONZALES FEDERAL  
Well No.: 1  
Pool Name, Including Formation: SIETE SAN ANDRES-EXT  
Kind of Lease: FED  
Lease No.: NM-048610-A  
State, Federal or Fee: FED

Location  
Unit Letter: D; 660 Feet From The NORTH Line and 660 Feet From The WEST  
Line of Section: 21 Township: 8-S Range: 31-E, NMPM, CHAVES County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil: THE PERMIAN CORP (TRUCKS)  
Address (Give address to which approved copy of this form is to be sent): BOX 3119, MIDLAND, TEXAS

Name of Authorized Transporter of Casinghead Gas:   
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
	D	21	8	31	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							

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
12-16-68	12-29-68	3857'	3810'

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
4227' RDB	SAN ANDRES	3726'	3772'

Perforations	Depth Casing Shoe
3726-52, 60-70	3857'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11"	8 5/8"	298'	250 Sx.
7 7/8"	4 1/2"	3857'	350 Sx.

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.)
1-6-69	1-18-69	DMP

Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24	-	-	-

Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
80	10	70	NA

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.

0+ 3-NMOCC-H

1- NSU

1- OBP

1- JEL

1- SUSP

1- RRY

(Signature)  
AREA SUPERINTENDENT

(Title)

JAN 21 1969

(Date)

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.

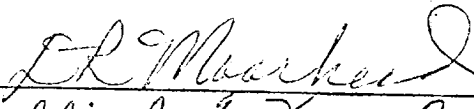
(DEVIATION SURVEYS)

<u>DEPTH</u>	<u>DEGREES OFF</u>
280	$\frac{1}{4}$
875	$\frac{1}{2}$
1370	$\frac{3}{4}$
1770	$\frac{1}{2}$
1950	1 -
3025	1 -
3370	$\frac{3}{4}$
3570	"
3760	$\frac{1}{2}$
3825	$\frac{1}{2}$

The above are true to the best of my knowledge.

  
AREA SUPERINTENDENT

Sworn to this date, January 21, 1969.

  
Notary Public In & For Lea Co. N.M.  
My Commission Expires 6-18-72