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NEW MEXICO OIL CONSERVATION COMMISSION

(Form C-104)
Revised 7/1/57

Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

HOBBS OFFICE O. C. C.

New Well
Recompletion

Nov 18 10 31 AM '63

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hobbs, New Mexico

November 16, 1963

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Panhandle Petroleum Corporation, Hobbs Unit, Well No. 27, in 1/4 3/4 1/4

(Company or Operator)

(Lease)

Unit Letter

Sec. 10, T. 36N, R. 23E, NMPM, Hobbs Stratum Pool

County: Hobbs Date Spudded: 11-9-63 Date Drilling Completed: 11-9-63

Elevation: 5200 Total Depth: 12,480 PBD: 12,480

Top Oil/Gas Pay: 12,480 Name of Prod. Form: Hobbs

Please indicate location:

| | | | |
|---|---|---|---|
| D | C | B | A |
| E | F | G | H |
| L | K | J | I |
| M | N | O | P |

PRODUCING INTERVAL -

Perforations: 11,480-11,500 1/2 3/4

Open Hole: Depth: 11,480 Casing Shoe: 11,480 Depth Tubing: 11,480

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: _____ MCF/Day; Hours flowed _____

Choke Size _____ Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): _____

Casing Press. _____ Tubing Press. _____ Date first new oil run to tanks: 11-16-63

Oil Transporter: The Hobbs Corp (Hobbs)

Gas Transporter: Hobbs Petroleum Corporation

(FOOTAGE)
Tubing, Casing and Cementing Record

| Size | Feet | Sax |
|-------|------|-----|
| 1-3/8 | 200 | 700 |
| 1-1/2 | 100 | 700 |
| 2 | 100 | 200 |
| 2-1/2 | 100 | 200 |

Remarks: _____

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved: _____, 19_____

Original Signer By: _____ (Company or Operator)

V. E. STALEY

By: _____ (Signature)

OIL CONSERVATION COMMISSION

By: _____

Title: Area Representative

Send Communications regarding well to:

Name: V. E. Staley

Title: _____

Address: Box 61 - Hobbs, New Mexico - 78240

100
101

The following is a list of the names of the persons who have been appointed to the various positions in the office of the Secretary of the State of New York.

[Handwritten signature]

The following is a list of the names of the persons who have been appointed to the various positions in the office of the Secretary of the State of New York.

[Faint handwritten text]

[Handwritten signature]

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NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

FORM C-110
(Rev. 7-60)

NOV 19 10 21 AM '63

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROVING OFFICE

Company or Operator: Pan American Petroleum Corporation Lease: Plains Unit Well No.: 1E

Unit Letter: L Section: 28 Township: 19-N Range: 32-E County: 100

Pool: Black Strawn Kind of Lease (State, Fed, Fee): Federal

If well produces oil or condensate give location of tanks: _____ Unit Letter: L Section: 28 Township: 19-N Range: 32-E

Authorized transporter of oil or condensate
The Foundry Corp. (Troy, Mo) Address (give address to which approved copy of this form is to be sent):
Box 9119, Midland, Texas

Is Gas Actually Connected? Yes No

Authorized transporter of casing head gas or dry gas Date Connected: _____ Address (give address to which approved copy of this form is to be sent): _____

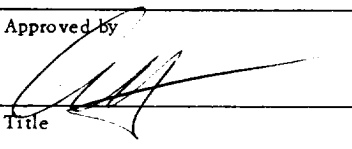
If gas is not being sold, give reasons and also explain its present disposition:
Vented and flared pending sale negotiations.

REASON(S) FOR FILING (please check proper box)

New Well Change in Ownership
Change in Transporter (check one) Other (explain below)
Oil Dry Gas
Casing head gas . Condensate..

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.
Executed this the 16 day of November, 19 63.

| | |
|---|---|
| <p style="text-align: center;">OIL CONSERVATION COMMISSION</p> <p>Approved by: </p> <p>Title: _____</p> <p>Date: _____</p> | <p>By: Original signed by: V. E. STALEY</p> <p>Title: <u>Area Superintendent</u></p> <p>Company: <u>Pan American Petroleum Corporation</u></p> <p>Address: <u>Box 66 - Hobbs, New Mexico</u></p> |
|---|---|