

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
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 ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain.)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name STATE "G"	Well No. 5	Pool Name, Including Formation HOBBS-DRINKARD	Kind of Lease State, Federal or Fee	Lease No. A-1573
Location Unit Letter E ; 1980 Feet From The NORTH Line and 660 Feet From The WEST Line of Section 33 Township 18-S Range 38-E , NMPM, LEA 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"/> 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 <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 E	Sec. 33	Twp. 18	Rge. 38	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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 8-23-69	Date Compl. Ready to Prod. 10-7-69	Total Depth 7040	P.B.T.D. 6983'					
Elevations (DF, RKB, RT, GR, etc.) 3657' R.D.B	Name of Producing Formation DRINKARD	Top Oil/Gas Pay 6894	Tubing Depth 6945'					
Perforations 6894, 6902, 6908, 6919-27, 6933	Depth Casing Shoe 7040'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 17 1/2" 12 1/4" 8 5/8"	CASING & TUBING SIZE 13 3/8" 9 5/8" 7"		DEPTH SET 425' 3958' 7040'		SACKS CEMENT 400 - Circ 550 Sx 00 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 10-7-69	Date of Test 10-8-69	Producing Method (Flow, pump, gas lift, etc.) FLOW	
Length of Test 24	Tubing Pressure 150	Casing Pressure DKR	Choke Size 28/64"
Actual Prod. During Test 358	Oil - Bbls. 322	Water - Bbls. 36	Gas - MCF 219 (GOR 680 Cgr 37')

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.

043-NMOCC-H

1-NSW

1-OBP

1-JEL

1-SUSP

1-RRY

(Signature)

AREA SUPT

(Title)

10-8-69

(Date)

OIL CONSERVATION COMMISSION

APPROVED

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</u>
198	" $\frac{3}{4}$
425	$\frac{1}{2}$
910	1 $\frac{1}{2}$
1390	"
1870	"
3067	$\frac{1}{2}$
3492	0
3770	$\frac{3}{4}$
4350	1 $\frac{1}{4}$
4990	1 $\frac{1}{2}$
6156	1 $\frac{3}{4}$

The above are true to the best of my knowledge.

Sworn to this date, October 8, 1969.

L. R. Moorhead

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