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NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

This form may 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 QUADRUPLICATE 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

3-6-61

(Place)

(Date)

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

Pan American Petroleum Corporation

(Company or Operator)

(Lease)

Well No. 1-A, in. NE / 1/4 SW / 1/4

K

Sec. 32

T. 22-S

R. 38-E

NMPM,

South Paddock

Pool

Unit Letter

Lea

County. Date Spudded 2-9-61

Date Drilling Completed 2/24/61

Please indicate location:

Elevation 3403 RIB

Total Depth 5803'

PBTD 5210'

Top Oil/Gas Pay 5150'

Name of Prod. Form. Paddock

PRODUCING INTERVAL -

Perforations 5155'-5180' W/2 JSPT

Open Hole

Depth

Casing Shoe 5803'

Depth

Tubing 5160'

OIL WELL TEST -

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

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 104 bbls. oil, 11 bbls. water in 24 hrs, * min. Size PM Choke

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): 500 Gal. 15% acid

Casing Press. PM Tubing Press. PM Date first new oil run to tanks 3-3-61

Oil Transporter The Permian Corporation

Gas Transporter _____

Remarks: _____

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

Approved _____, 19____

Pan American Petroleum Corporation

Original Signed by (Company or Operator)

V. E. STALEY

By: _____

(Signature)

Title Area Superintendent

Send Communications regarding well to:

Name V. E. Staley

Address Box 68, Hobbs, New Mexico

OIL CONSERVATION COMMISSION

By: _____

Title _____

Size	Feet	Sax
8-5/8"	310	165
4-1/2"	5803	725
2"	5160	

2080' FSL X 1880' FNL

Tubing, Casing and Cementing Record