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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

SANTA FE	1	T FOR ALLOWABLES P. C.	Effoative 1.1	ld C-104 and C-1. -65	
FILE		AND OIL AND NATUR	m		
U.S.G.S.	AUTHORIZATION TO TI	RANSPORT OILTAIND NATUR	GAL GAS		
LAND OFFICE	-				
TRANSPORTER OIL					
GAS	\dashv				
OPERATOR					
Operator					
	us Airin an				
Skelly 011 Com	PALLY				
	- Nahina Mass Massalas a 200	4 @			
Reason(s) for filing (Check proper box	<u>- Nobes, New Merico 882</u>	Other (Please explain	7)		
New Well	Change in Transporter of:	Chauna ac	Zacaa mama Sman		
Recompletion		_	lease new from		
Change in Ownership X			Well #10 Jume 1. 1969		
Change in Content of		OF RESERVE	7302		
If change of ownership give name	Pan American Petrolei	um Corporation, P. O.	Box 68, Hobbs, N.	м. 88240	
and address of previous owner	1 cm American 1001070	an outposed and a second			
	* D.40D				
Lease Name Many hollowhile		Formation Kind o	f Lease	Lease No.	
And the same water 11 th	1.0	State	Federal or Fee State	B-9613	
Drickard Unit	43 Pollarnies	Tubb-Driebned State,	502.96	D-9013	
Location	((a) Nambh	3090	Tiles en de		
Unit Letter;;	660 Feet From The North	Line and 1980 Feet	From The East		
	~1 =			9	
Line of Section 32 To	ownship 245 Range	386 , NMPM,	`.a a	County	
				•	
DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL	GAS Address (Give address to which	h approved copy of this form is	to be sent)	
Name of Authorized Transporter of O	II or Condensate	Address (Give dualess to which	approved copy of this form is		
Texas New Mexico ?	ipalima Company	Address (Give address to which	Midland Topes 79	701	
Name of Authorized Transporter of Co	asinghead Gas 📆 of Dry Gas 🚺	ł		to be sent;	
El Paso Natural Ga	S Company	Is gas actually connected?	20. Texas 70999		
If well produces oil or liquids,	Unit Sec. Twp. Ege.	Is gas actually connected?	When		
give location of tanks.	G 32 248 381	Yes	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
and the state of t	with that from any other lease or po-	ol give commingling order numb	er:		
COMPLETION DATA	Ith that from any other rease or po-	or, give comminging or set tourns			
	Oil Well Gas Well	New Well Workover Dee	pen Plug Back Same R	es'v. Diff. Res	
Designate Type of Complet	ion = (X)		i i	i F	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.,	Name of F	Ton Oll /Gae Pay	Tubing Depth		
(33,733,733,733,733,733,733,733,733,733,			.		
Perforations			Depth Casing Shoe		
	ا المسالسية	UIULL			
	TUBING, CASING,	AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CE	EMENT	
HOLE SIZE	CASING & TODING SIZE				
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must b	e after recovery of total volume of l	oad oil and must be equal to o	r exceed top allo	
OIL WELL	ante for this	s depth or be for full 24 hours)	- 156 1		
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump	, gas lift, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas - MCF		
l					
CAC WEST					
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condense	xte	
Actual Piod. 1881 MCF/D					
	Tuhing Description 4-1	Casing Pressure (Shut-in)	Choke Size		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Canny Freshma (since-24)			
CERTIFICATE OF COMPLIA	NCE	OIL CONS	SERVATION COMMISSI	ON	
		1 Clath		4.5	
I haveby carrify that the sules and	d regulations of the Oil Conservati	ion APPROVED	\mathcal{L}	_ , 19	
O hour home complied	with and that the information giv		Maria		
above is true and complete to t	he best of my knowledge and beli	ef. BY	June 1		
		TITUE S			
lon-					
(URIGIN	AL).	This form is to be fi	led in compliance with RU	LE 1104.	
* MIGNE	D V. E. FLETCHER	If this is a request f	If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviation		
(Si	gnature)	well, this form must be a	ccompanied by a tabulation in accordance with RULE	111.	
194 A A	8 . 4 . 4 .	I feers favou ou rue werr y			

Bistrict Production Harwiges (Title)

(Date)

June 2, 1969

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.