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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

AUG 25 8 61 AM '67

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. (DEVIATION SURVEYS - BACK SIDE)

Operator
PAN AMERICAN PETROLEUM CORPORATION

Address
BOX 68, HOBBS, N. M. 88240

Reason(s) for filing (Check proper box)

New Well	X	Change in Transporter of:	
Recompletion		Oil	Dry Gas
Change in Ownership		Casinghead Gas	Condensate

Other (Please explain)
NAME CHANGED:
FROM: PAN AMERICAN PETR. CORP.
TO: AMOCO PRODUCTION CO.
EFFECTIVE: 2-1-71

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE — Fowler-Upper Yeso R-3997

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
SOUTH MATTIX UNIT FED	23	~~FOWLER BLINEBRY~~	State, Federal or Fee FED	NM-0321613

Location
Unit Letter O : 660 Feet From The SOUTH Line and 1830 Feet From The EAST

Line of Section 15 Township 24-S Range 37-E , NMPM, LEA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil X or Condensate	Address (Give address to which approved copy of this form is to be sent)
SHELL PIPE LINE CORP	BOX 1910 MIDLAND, TEXAS
Name of Authorized Transporter of Casinghead Gas X or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
EL PASO NATURAL GAS CO.	BOX 1384, JAL N. M.

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	O	15	24	37	YES (ENG STA No. 6382801)	8-13-67

If this production is commingled with that from any other lease or pool, give commingling order number: PC-272

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		X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
7-20-67	8-10-67	5701'	5665'

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3259' R.D.B.	BLINEBRY	5406'	5617 V

Perforations	Depth Casing Shoe
5406, 28, 70, 73, 5504-10, 46-52, 5642-45 W/ 1JSPF	5701

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11"	8 5/8"	1002	500
7 7/8"	4 1/2"	5701	600

V. TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
8-13-67	8-21-67	FLOW	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
24 HRS	1575	1625	14/64
Actual Prod. During Test	**Oil-Bbls.**	**Water-Bbls.**	**Gas-MCF**
103	25	78	1587 (GOR 63,480) 34.1

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.

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.

cc: NMOCC-H
1- C.S.P
1- N.S.W
1- S.J.S.P
1- K.R.Y.
1- STATE LAND
1- ATLANTIC
1- CONOCO
1- STANOLIND
1- TENNECO

(Signature)
AREA SUPERINTENDENT
(Title)
8-23-67
(Date)