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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

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

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
JUL 19 7 54 AM '68

(DEVIATION SURVEYS- BACK SIDE)

I. Operator
PAN AMERICAN PETROLEUM CORPORATION
Address
BOX 68, HOBBS, N. M. 80440
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)
**NAME CHANGED:
FROM: PAN AMERICAN PETR. CORP.
TO: AMCCO PRODUCTION CO.
EFFECTIVE: 2-1-71**
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name SOUTH MATIX UNIT FED	Well No. 24	Pool Name, including Formation FOWLER ELLENBURGER	Kind of Lease State, Federal or Fee FED	Lease No. NM-0321613
Location Unit Letter O : 510 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 <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> SHELL PIPE LINE CORP	Address (Give address to which approved copy of this form is to be sent) Box 1910 MIDLAND TEXAS			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> EL PASO NATURAL GAS Co.	Address (Give address to which approved copy of this form is to be sent) Box 1384 JAL N.M.			
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 15	Twp. 24	Rge. 37
	Is gas actually connected? YES		When 7-12-68	

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 4-2-68	Date Compl. Ready to Prod. 7-11-68	Total Depth 10012'	P.B.T.D. 9654'					
Elevations (DF, RKB, RT, GR, etc.) 3260' RDB	Name of Producing Formation ELLENBURGER	Top Oil/Gas Pay 9554'	Tubing Depth 9575' Appx					
Perforations 9554-88'	Depth Casing Shoe 10012'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		321'		380'			
11"	8 5/8"		4381'		550'			
7 7/8"	5 1/2"		10012'		1200'			

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 7-11-68	Date of Test 7-12-68	Producing Method (Flow, pump, gas lift, etc.) SWAB	
Length of Test 24	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 249	Oil-Bbls. 249	Water-Bbls. 0	Gas-MCF NA

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 **John W. Runyan**
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.

0 + 4- NMOC-11

1- NSW

1- SUSP

1- RRV

1- ATLANTIC

1- CONOCO

1- TENNECO

1- SYD & TGY

1- OBP

(Signature)

AREA SUPERINTENDENT

(Title)

JUL 17 1968

(Date)

DEVIATION SURVEYS

DEPTH	DEGREES OFF	DEPTH	DEGREES OFF
315	1/4	8077	4 3/4
720	1/4	8113	"
1113	1/2	8152	4 1/2
1415	3/4	8169	4 3/4
1778	1/2	8200	"
2142	3 2	8228	"
2263	3 3/4	8246	5 1/4
2321	3 1/4	8282	5 1/2
2415	"	8322	5 3/4
2656	2 3/4	8382	6
2786	1 1/2	8472	5 3/4
2869	2 1/4	8533	5 3/4
3224	1 1/2	8633	5 3/4
3470	3/4	8803	6 -
3652	1 1/4	8873	6 1/4
3810	1 1/4	8893	6 1/4
4125	1	9049	6 1/2
4381	1 1/4	9138	6 1/2
4669	1 3/4	9217	6 1/2
5016	1	9285	6 1/4
5287	1 3/4	9397	6 3/4
5790	1 -	9516	5 1/2
5956	1 1/2	9596	6 -
6322	1 1/4	9907	5 -
6548	2	10012	4 3/4
6948	2 3/4		
7107	3		
7198	3		
7230	3 1/4		
7347	3 3/4		
7404	3 1/4		
7437	"		
7497	3 3/4		
7559	"		
7619	"		
7679	3 1/2		
7800	4 1/2		
7860	4 -		
7921	4 1/2		
7982	4 1/2		
8044	4 3/4		

The above are true to the best of my knowledge.



Sworn to this date, July 17, 1968.

Notary Public
My Commission Expires 6-18-72