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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State [X] Fee [ ]

5. State Oil & Gas Lease No.
A-1212

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT —" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name

2. Name of Operator
PAN AMERICAN PETROLEUM CORPORATION

8. Farm or Lease Name
STATE A-2 RIAA

3. Address of Operator
BOX 68, HOBBS, N. M. 88240

9. Well No.
6

4. Location of Well
UNIT LETTER B , ______ FEET FROM THE ______ LINE AND ______ FEET FROM THE ______ LINE, SECTION 9 TOWNSHIP 19-S RANGE 38-E NMPM.

10. Field and Pool, or Wildcat
HOBBS GSA

15. Elevation (Show whether DF, RT, GR, etc.)
3605 DF

12. County
LEA

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK [ ]
- TEMPORARILY ABANDON [ ]
- PULL OR ALTER CASING [ ]
- PLUG AND ABANDON [ ]
- CHANGE PLANS [ ]
- OTHER ______ [ ]

SUBSEQUENT REPORT OF:

- REMEDIAL WORK [X]
- COMMENCE DRILLING OPNS. [ ]
- CASING TEST AND CEMENT JOB [ ]
- ALTERING CASING [ ]
- PLUG AND ABANDONMENT [ ]
- OTHER ______ [ ]

17. Describe Proposed or Completed Operations (*Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work*) SEE RULE 1103.

In an effort to increase productivity cleaned out to TD (4185), and acidized open hole 4120-76 with 3000 gal. Evaluated and restored to production.

Prior pmp 20 BO x 30 BW 24 hours.
after pmp 87 BO x 17 BW 24 hours - GOR 2310.

TD-4185. OC- 2-17-69
7" CSA 3998 Comp - 2-26-69
10 3/4" CSA 2810
16" CSA 217

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

SIGNED ______ TITLE AREA SUPERINTENDENT DATE FEB 27 1969

0+2-NMOCC-H
1-NSW
1-SOS
1-RRL

APPROVED BY ______ TITLE ______ DATE ______

CONDITIONS OF APPROVAL, IF ANY: