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LAND OFFICE	
OPERATOR	

Form O-165
Revised 1-1-65

NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. Indicate Type of Lease
State Fee

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

10. TYPE OF WELL
OIL WELL GAS WELL DRY OTHER _____

11. TYPE OF COMPLETION
NEW WELL WORK OVER DEEPEN PLUG BACK DIFF. RESVR. OTHER _____

7. Unit Agreement Name

1. Name of Operator
PAN AMERICAN PETROLEUM CORPORATION

8. Form or Lease Name
STATE A-2 RIAA

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

9. Well No.
34

4. Location of Well

10. Field and Pool, or Wildcat
WILDCAT

UNIT LETTER **A** LOCATED **660** FEET FROM THE **NORTH** LINE AND **660** FEET FROM

11. County
LEA

THE **EAST** LINE OF SEC. **9** TWP. **19-S** RGE. **38-E** NMPM

13. Date Spudded **9-16-68** 15. Date T.D. Reached **10-29-68** 17. Date Compl. (Ready to Prod.) **-** 18. Elevations (DF, RKB, RT, GR, etc.) **3620' R. D. B.** 19. Elev. Casinghead

20. Total Depth **8812** 21. Plug Back T.D. **5450** 22. If Multiple Compl., How Many _____ 23. Intervals Drilled By
Rotary Tools _____ Cable Tools **-**

24. Producing Interval(s), of this completion - Top, Bottom, Name
none

25. Was Directional Survey Made
No

26. Type Electric and Other Logs Run
MLL, Density, Prox-Mh, IND-LL, S-GR, Porosity

27. Was Well Cored
Yes

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13 3/8"	48#	416'	17 1/2"		
9 7/8"	32.3-36#	4354'	12 1/4"	425 Sx.	
5 1/2"	14-17#	7929'	8 3/4"	1300 Sx. 500 Sx	

29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET

31. Perforation Record (Interval, size and number)
5388-92 w/2JSPF - PADDOCK

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
5388-92	500 gal 15%

33. PRODUCTION

Date First Production _____ Production Method (Flowing, gas lift, pumping - Size and type pump) _____ Well Status (Prod. or Shut-in) _____

Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas - Oil Ratio
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API (Corr.)	

34. Disposition of Gas (Sold, used for fuel, vented, etc.) _____ Test Witnessed By _____

35. List of Attachments

I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

04- N M O C C - 11
1- N S W
1- W J F
SIGNED _____ TITLE **AREA SUPERINTENDENT** DATE **FEB 13 1969**

1-224

INSTRUMENTS

These instruments are to be used for the purpose of recording the results of the tests conducted in accordance with the instructions on the back of the instrument. The instrument is to be used in accordance with the instructions on the back of the instrument. The instrument is to be used in accordance with the instructions on the back of the instrument.

INSTRUMENT FORMS TO BE USED IN CONFORMANCE OF ARTICLE 10

Instrument No.	Name	Quantity	Remarks
1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
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17
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30

FOR RADIO RECORD (Attach to instrument)

No.	Time	Formation	Remarks
001	0800
002	0810	...	...
003	0820	...	...
004	0830	...	...
005	0840	...	...
006	0850	...	...
007	0900	...	...
008	0910	...	...
009	0920	...	...
010	0930	...	...
011	0940	...	...
012	0950	...	...
013	1000	...	...
014	1010	...	...
015	1020	...	...
016	1030	...	...
017	1040	...	...
018	1050	...	...
019	1100	...	...
020	1110	...	...
021	1120	...	...
022	1130	...	...
023	1140	...	...
024	1150	...	...
025	1200	...	...
026	1210	...	...
027	1220	...	...
028	1230	...	...
029	1240	...	...
030	1250	...	...

On the bottom of the back of map
 Enclosed
 SUPERVISOR
 1000th St. N.W., January 15, 1951
 Mr. [Name] and Mr. [Name]
 Washington D.C. 20540