

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION, C.
HOBBS OFFICE, O.C.C.

Form O-101
Revised 12-65

APR 23 10 47 AM '69

1A. Indicate Type of Lease
STATE FEDERAL

5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Form or Lease Name GRIZZELL B	
2. Name of Operator PAN AMERICAN PETROLEUM CORPORATION		9. Well No. 1	
3. Address of Operator BOX 68, HOBBS, N. M. 88240		10. Field and Pool, or Wildcat PADDOCK	
4. Location of Well UNIT LETTER G LOCATED 1980 FEET FROM THE NORTH LINE AND 1980 FEET FROM THE EAST LINE OF SEC. 8 TWP. 22-S RGE. 37E NMPM		12. County LEA	
19. Proposed Depth APPRX 5300		19A. Formation PADDOCK	20. Rotary or C.T. -
21. Elevations (Show whether DF, RT, etc.) 3427' DF	21A. Kind & Status Plug. Bond BLANKET-ON FILE	21B. Drilling Contractor -	22. Approx. Date Work will start 4-18-69

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
NA	10 3/4"		294'	200	
NA	7"	22#	3425'	300	
6 1/4"	5"	15# LINER	3348-6570'	300	

Propose to abandon Drinkard zone and recomplete in the Paddock zone as follows:
 DRINKARD - abandon by setting BP @ 6440' + cap w/ 10' cmt.
 (PERFS: 6528 & 6556')
 PADDOCK - Perforate interval 5278-88' w/ 25SPE
 acidize w/ 2000 gal 15%. Evaluate.

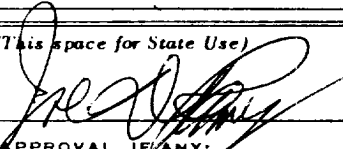
TD - 6580
PAD - 6575

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM; IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE, GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

Signed _____ Title **AREA SUPERINTENDENT** Date **APR 18 1969**

(This space for State Use)

APPROVED BY  TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

- 044-NMOC-12
- 1-NSW
- 1-SUSD
- 1-RR4