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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-102  
 FEB 27 1970  
 Supersedes Old  
 C-102 and C-103  
 Effective 1-1-65

5a. Indicate Type of Lease  
 State  Fee   
 5. State Oil & Gas Lease No.

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- 2. Name of Operator PAN AMERICAN PETROLEUM CORPORATION 3. Address of Operator BOX 68, HOBBS, N. M. 88240 4. Location of Well UNIT LETTER <u>D</u> , <u>660</u> FEET FROM THE <u>NORTH</u> LINE AND <u>660</u> FEET FROM THE <u>WEST</u> LINE, SECTION <u>14</u> TOWNSHIP <u>8-S</u> RANGE <u>30-E</u> NMPM.	NAME CHANGED: FROM: PAN AMERICAN PETR. CORP. TO: AMOCO PRODUCTION CO. EFFECTIVE: 2-1-71	7. Unit Agreement Name 8. Farm or Lease Name WASLEY 9. Well No. 4 10. Field and Pool, or Wildcat CATO San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 4115' RPB.	12. County CHAVES	

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
 NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	

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 order to restore well to top allowable acidized perms. 3433-3543 w/ 4000 gal 28% LSTNE.  
 Prior - pump 2 60 x 0 BW 24 hrs. After Pump 90 60 + 8 BW in 24 hrs.

TD- 3594' OC- 2-19-70  
 PBD- 3575' Comp 2-23-70

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

AREA SUPERINTENDENT

SIGNED \_\_\_\_\_ TITLE \_\_\_\_\_ DATE FEB 25 1970

APPROVED BY [Signature] TITLE AREA SUPERINTENDENT DATE [Signature]  
 CONDITIONS OF APPROVAL, IF ANY:  
 1- SUSP