

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN
(Other Instr. on reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-01189(A)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. UNIT AGREEMENT NAME BIG EDDY UNIT FEDERAL
2. NAME OF OPERATOR PAN AMERICAN PETROLEUM CORPORATION	8. FARM OR LEASE NAME Big Eddy Unit
3. ADDRESS OF OPERATOR BOX 68, HOBBS, N. M. 80440	9. WELL NO. 7
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT BIG EDDY STRAWN
14. PERMIT NO.	11. SEC., T., R., E., OR S.W. AND SURVEY OR AREA 19-20-31 NMPM
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 3549' R.D.B.	12. COUNTY OR PARISH EDDY
	13. STATE N.M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

In accordance w/ form G-331 dated 1-17-67, repair work performed as follows:

Perforated interval 11348-370 w/25PF. Set Baker Model D Packer @ 11385'. Acidized pups in three treatments. Total volume 7500 gals LSTNE acid. Tubing ran w/ tubing stop to isolate pups below packer. PSI sleeve, @ appx 11370, opened. Producing from pups 11348-370.

On Out, Flowed 261 Box 12 BLW, 24 hrs, 23/64" ch. TDF-700. CDC-1100#. P/106, FLW 205 Box 150 BLW 24 hrs. 14/64" ch. TDF 2200#.

Comp. 2-7-67

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE

AREA SUPERINTENDENT

DATE

2-7-67

(This space for Federal or State approval, if any.)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

014-USGS-ART
1-NSW
1-SUSP
1-RRV
1-STATE LAND
1-WJ PARSONS

APPROVED

FEB

R. L. BECKMAN
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

RECEIVED
FEB 8 - 1967
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO