ITED STATES DEPARTMENT OF THE INTERIOR (Other instructions

SUBMIT IN T ICATE*

Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

GEOLOGICAL SURVEY

SUNDRY	NOTICES	AND	REPORTS	ON	WELLS

PAN AMERICAN PETROLEUM CORPORATION 3. ADDRESS OF OPERATOR BOX 68, HOBBS, N. M. 88240 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980 FNL x 1980 FWL Sec. 3 (SE/A NW/A, JNIT F) 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		IDRY NOTICES AND REPORTS ON WELLS form for proposals to drill or to deepen or plug back to a different refuse "APPLICATION FOR PERMIT—" for such proposals.)	eservoir.
PAN AMERICAN PETROLEUM CORPORATION 3. ADDRESS OF OPERATOR BOX 68, HOBBS, N. M. 88240 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980 FNL x 1980 FWL Sec. 3 (SE/A NW/A, JNIT F) 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, OR, etc.) 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data	= -	n	1 . <u>_</u>
PAN AMERICAN PETROLEUM CORPORATION 3. ADDRESS OF OPERATOR BOX 68, HOBBS, N. M. 88240 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980 FNL x 1980 FWL Sec. 3 (SE/A NW/A, JNIT F) 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		OTHER OLULLING	BIG EDDY UNIT FED
8. ADDREAS OF OPERATOR BOX 68, HOBBS, N. M. 88240 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 19. WELL NO. 10. FIELD AND FOOL, OR WILDCAT 11. SEC., T., R., M., OR BLK. AND BURYET OR AREA 19. WELL NO. 10. FIELD AND FOOL, OR WILDCAT 11. SEC., T., R., M., OR BLK. AND BURYET OR AREA 3-21-29 NMP! 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3412 R. D. B Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data	2. NAME OF OPERATOR		
BOX 68, HOBBS, N. M. 88240 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 19. FIELD AND FOOL, OR WILDCAT 11. SEC., T., R., M., OR BLE. AND BURVET OR AREA 3-21-29 NMP! 14. FERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3412, R. D. B Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data	PAN AMERICAN PE	etroleum corporation U	
10. FIELD AND POOL, OR WILDCAT See also space 17 below.) At surface 1980 FNL x 1980 FWL Sec. 3 (SE/A NW/A, JNIT F) 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 16. 17. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data			9. WELL NO.
See also space 17 below.) At surface 1980 FNL x 1980 FWL Sec. 3 (SE/A NW/A, JNIT F) 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3-21-29 NMP! 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data	BOX 68, HOBBS, N	I. M. 88240	18
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16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data	14. PERMIT NO.	15. BLEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
Check Appropriate box to indicate radiole of radice, Report, of Other Daid		3412. R.D.B.	EDDY N.M.
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	16.	Check Appropriate Box To Indicate Nature of Notice,	Report, or Other Data
		NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:

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NOT	ice of 1	INTENTION TO:		SUBSEQUENT REPO	RT OF:
TEST WATER SHUT-OFF		PULL OR ALTER CASING		WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	_	MULTIPLE COMPLETE		FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZING	ABANDON MENT*
REPAIR WELL		CHANGE PLANS		(Other)	
(Other)			L	(Note: Report results of multip Completion or Recompletion Repo	ort and Log form.)
DESCRIBE PROPOSED OR CO	MPLETE	D OPERATIONS (Clearly state	all pertine	nt details, and give pertinent dates, including	estimated date of starting

ENDED INCOMED ON CONFIDENCE OF PRACTIONS (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 sones pertinent to this work.)*

On 4-17-67, 8 %" OD 32" J-55 STIC Casing was set @ 4117 w/ DU Tool set @ 2044! Cemented 1st stage w/ 650 sy Incor neat. Comented thru DU Tone w/ 1600 sy Cement in 7 stages. Cement circulated. Cementiny Started on 4/17 and concluded on 4/19/67. y fler WOC 18 hours, tested easing W/ 1800 psi for 30 minutes.

Reduced hale to 71/8" @ 4117 and resumed drelling.

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		APR 2. COLORICAL SURVEY			
18. I hereby certify that the foregoing is true and correct SIGNED	TITLE _	AREA SUPERINTENTE	:	DATE 4-25-67	
(This space for Federal or State office page 1)	TITLE _		-	DATE	
GGS- ART. SW FATE LAND	T				

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"See Instructions on Reverse Side