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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
State Gas Unit "BA"	
8. Farm or Lease Name	
9. Well No.	
1	
10. Field and Pool, or Wildcat	
Basin Dakota	
12. County	
San Juan	

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER-	2. Name of Operator
	PAN AMERICAN PETROLEUM CORPORATION
3. Address of Operator	
	P. O. Box 480, Farmington, New Mexico
4. Location of Well	
UNIT LETTER <u>Q</u> , <u>1760'</u> FEET FROM THE <u>North</u> LINE AND <u>1450'</u> FEET FROM THE <u>East</u> LINE, SECTION <u>16</u> TOWNSHIP <u>3-N</u> RANGE <u>12-W</u> N.M.P.M.	
15. Elevation (Show whether DF, RT, GR, etc.)	
	6139 (RDB)

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Report of Potential Test

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.

This is to report the following Potential Test:

Potential Test February 9, 1965. Flowed 6590 MCFFPD through 3/4" choke after 3 hours flow. Absolute open flow potential 9632 MCFFPD. Shut in casing pressure after 7 days 2008 psig.



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

SIGNED <u>ORIGINAL SIGNED BY</u>	TITLE <u>Administrative Clerk</u>	DATE <u>February 19, 1965</u>
<u>L. R. TURNER</u>		
Original Signed <u>Emery C. Arnold</u>	TITLE <u>Supervisor Dist. # 3</u>	DATE <u>FEB 23 1965</u>
APPROVED BY		
CONDITIONS OF APPROVAL, IF ANY:		