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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 ☒ Fee ☐
5. State Oil & Gas Lease No. OG-202
7. Unit Agreement Name
8. Farm or Lease Name STATE "DC"
9. Well No. 1
10. Field and Pool, or Wildcat BASLEY No. Lower Penn.
12. County LEA

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 ☒ GAS WELL ☐ 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>P</u> <u>660</u> FEET FROM THE <u>SOUTH</u> LINE AND <u>660</u> FEET FROM THE <u>EAST</u> LINE, SECTION <u>16</u> TOWNSHIP <u>11-S</u> RANGE <u>33-E</u> NMPM.
15. Elevation (Show whether DF, RT, CR, etc.) 4285' RDB

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	COMMENCE DRILLING OPNS. ☐
PULL OR ALTER CASING ☐	CASING TEST AND CEMENT JOB ☐
OTHER ☐	OTHER ☒ Recompleted from upper to Lower Penn.

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.)

Recompleted well from upper Penn to Lower Penn. Upper Penn isolated by setting Packers: Guiberson L-30 Hookwall set @ 9150'; BAKER MODEL D Prod. packer @ 9600'. (no sleeves between packers). Lower Penn. Perforated intervals 9780'-86', 9867'-69', 9954'-60', 9984'-93', 10007'-10', 25'-27', 49'-51', 78'-80', 89'-91', 10139'-141', 144'-146' w/ 215SPF. Acidized w/ 9000 gal 15% LSTNE in 6 stages. Evaluated and put on production.

TD-10826'	PACKER- L-30 @ 9150'	CC- 9-22-69
PRD-10613'	" MODEL D @ 9600'	COMP- 10-9-69
5 1/2" CSA 10715'	2 3/8" TBG @ 9600'	
	1" Kobe @ 9150'	

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

SIGNED _____	TITLE AREA SUPERINTENDENT	DATE OCT 9 1969
APPROVED BY _____		DATE _____
CONDITIONS OF APPROVAL, IF ANY: 1-RR4		