

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION C. C.

JAN 26 8 07 AM '67

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. OG-530
7. Unit Agreement Name
8. Farm or Lease Name STATE "DG"
9. Well No. 1
10. Field and Pool, or Wildcat UNDESIGNATED
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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Drilling
2. Name of Operator PAN AMERICAN PETROLEUM CORPORATION
3. Address of Operator BOX 68, HOBBS, N. M. 88240
4. Location of Well UNIT LETTER F 1980 FEET FROM THE NORTH LINE AND 1980 FEET FROM THE WEST LINE, SECTION 16 TOWNSHIP 11-S RANGE 33-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

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"/> Correction

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 1708.

Form C-103, dated 12-27-66, erroneously states that the "cement circulated" behind the 8 5/8" OD casing. The cement did not circulate.
(8 5/8" OD 24-32" J55 csg out @ 3851' w/ 200 # 12% Gel + 200 # meat)

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

SIGNED [Signature]
12- NMOCH
1- NSW
APPROVED BY
1- SUSP
CONDITIONS OF APPROVAL, IF ANY:
1- RRY

TITLE **AREA SUPERINTENDENT**
ORIGINAL & THREE COPIES
SHOULD BE FORWARDED TO
TITLE **ENGINEER DISTRICT No. 1**

DATE **1-25-67**
DATE