HITED CTATES

May 1963)	DEPARTMENT OF THE INTE GEOLOGICAL SURVEY	Budget Bureau No. 42-14444. 5. LEASE DESIGNATION AND SERVATION OF STATE AND SERVATION	
	NDRY NOTICES AND REPORTS is form for proposals to drill or to deepen or ph Use "APPLICATION FOR PERMIT—" for suc	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
OIL GAS WELL	OTHER Drilling	7. UNIT AGREEMENT NAME	
NAME OF OPERATOR			8. FARM OR LEASE NAME
PAN AMERICAN PETROLEUM CORPORATION			FEDERAL"D' GAS COM
ADDRESS OF OPERATOR			9. WELL NO.
BOX 68, HOBBS, 1	N. M. 88240 (Report location clearly and in accordance with a	10	
See also space 17 below.) At surface			10. FIELD AND POOL, OR WHEREAT
m surace		EUFFALO UALLEY PENN-GI	
1650 501	1050 551 0 11 11	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
1000 L27 3	× 1650 FEL Sec. 11 (UNIT	11-15-27 NMPM	
4. PERMIT NO.	PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)		12. COUNTY OR PARISH 13. STATE
			CHAUES NM
6.	Check Appropriate Box To Indicate	Nature of Notice, Report, or C	•
NOTICE OF INTENTION TO:			UENT REPORT OF:
TEST WATER SHUT-	OFF FULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(Other) SPUDDIN	\sim
(Other)		(Note: Report results	of multiple completion on Well

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.)*

FIZO DRILLING CO. spredded 17/2" hole 12-10-68 (1: PM).

On 12-11-68, 13 % 00 48" H-40 Gaoing was Det © 317 W/ 350 P4. Incor 2% Get. Coment eirc. Cifter N. O. C. 18 hours, topted casing unth 1000 psi for 30 min. Jest O.L.

Peduced hole to 11 "@ 317" and resumed

RECEIVED

DEC 10 1968

a. c. c. RTERIA. DEFIDE

AREA SUPERINTENDENT TITLE

DATE 12-16-68

(This space for Federal or State office use)

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

CONDITIONS OF APPROVAL, IF ANY:

SIGNED .

*See Instructions on Reverse Side