

N. M. O. C. C. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN 1. Llicate*
(Other instructions on reverse side)

Form approved. Copy To S.F.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-065478(6)
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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—" 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 (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
985.25' FSL x 2297.02' FEL Sec 9 (Unit O, SW 1/4 SE 1/4)

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)
3513' R. D. B.

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
MALCO "K" Federal

9. WELL NO.
2

10. FIELD AND POOL, OR WILDCAT
EMPIRE-Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
9-18-27 NMPM

12. COUNTY OR PARISH
EDDY

13. STATE
N.M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☒

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) ☐
REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

In accordance w/ Form 9-331 submitted 3-7-68, further work is proposed:

*Perforate intervals 5829'-40', 5651'-58' w/ 2 JS PF.
Acidize w/ 2000 gal 15%.
Evaluate*

RECEIVED

APR 1 1969

O. C. C.
ARTESIA, OFFICE

RECEIVED

APR 15 1969

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

TD- 5835
PBD- 5804

PSA- 5657

4 1/2" CSA 5835

PERFS: 5676-87, 5696-5708, 5715-22, 5737-42.

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

SIGNED

TITLE AREA SUPERINTENDENT

DATE APR 14 1969

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE APR 15 1969

CONDITIONS OF APPROVAL, IF ANY:

W 4- USGS-ART
1- NSW
1- SUSP
1- RRV
1- ATLANTIC

*See Instructions on Reverse Side