

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐		5. LEASE DESIGNATION AND SERIAL NO. 16 - 070937	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Oth ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Pan American Petroleum Corporation		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Box 68 - Hobbs, New Mexico - 88240		8. FARM OR LEASE NAME J. E. Simon-Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 330' FSL X 987.2' FWL, Sec. 4 (Unit M, SW/4 SW/4) At top prod. interval reported below At total depth		9. WELL NO. 1	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Empire Abo	
DATE ISSUED		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA 4-18-27 RMPM	
12. COUNTY OR PARISH Reddy		13. STATE New Mexico	
15. DATE SPUDDED 2-9-64	16. DATE T.D. REACHED 3-4-64	17. DATE COMPL. (Ready to prod.) 3-8-64	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3553' RDM
19. ELEV. CASINGHEAD	20. TOTAL DEPTH, MD & TVD 5524'		
21. PLUG, BACK T.D., MD & TVD 5455'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY 0-5524'		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5428' - 5443' Abo	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray Neutron Log; Depth Control Log, Acoustic-Gamma Ray Log	
27. WAS WELL CORED Yes		28. CASING RECORD (Report all strings set in well)	
CASING SIZE		WEIGHT, LB./FT.	DEPTH SET (MD)
8-5/8"		24#	1480'
4-1/2"		9.5#	5524'
HOLE SIZE		CEMENTING RECORD	
11"		625 ex. circ	
7-7/8"		800 ex.	
29. LINER RECORD		30. TUBING RECORD	
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
2-3/8"		5438'	5230'
31. PERFORATION RECORD (Interval, size and number) 5428' - 5443' W/2 JSPF		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
5428-43		5000 gal. acid.	
33. PRODUCTION			
DATE FIRST PRODUCTION 3-8-64		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut-in) Producing		DATE OF TEST 3-10-64	
HOURS TESTED 24		CHOKE SIZE 18/64	
PROD'N. FOR TEST PERIOD 125		OIL—BBL. 176	
GAS—MCF. 4 BLN		WATER—BBL. 1405	
FLOW. TUBING PRESS. 175		CASING PRESSURE Plr	
CALCULATED 24-HOUR RATE 175		OIL—BBL. 176	
GAS—MCF. 4 BLN		WATER—BBL. 1405	
OIL GRAVITY-API (CORR.)		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented	
TEST WITNESSED BY D. C. Pourifoy		35. LIST OF ATTACHMENTS None	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
Original Signed by: V. A. STALEY		TITLE Area Superintendent	
DATE 3-11-64		DATE 3-11-64	

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. **Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
Abu Reef	5333	5443	Oil & Gas Bearing Zone	Queen San Andres Temo Abu Reef			743 1480 2775 5333
Cored	5178	5924 (TD)					