UNITED STATES DEPAK, MENT OF THE INTERIOR

RIPLICATE.

Form approved. Budget Bureau No. 42-R1424.

			AND	SERIAL	NO.
I M	-0	25	3	NA	

	GEOLOGICAL SURVEY	Capy	NM-025604
SUNDRY NOT (Do not use this form for proportion use "APPLICATION")	ICES AND REPORTS (sals to drill or to deepen or plug atton FOR PERMIT—" for such p	ON WELLS back to a different reservoir.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
OIL GAS WELL OTHER	DRILLING	RECEIVE	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR PAN AMERICAN PETROLEUM CO		MAY 1 6 1000	8. FARM OR LEASE NAME MALCO "G" FELLERAL
3. ADDRESS OF OPERATOR		MAL T 0.1308	9. WELL NO.
4BOX-68 HOBBS N. M. 88240 See also space 17 below.) At surface	learly and in accordance with any	State requirements	10. FIELD AND POOL, OR WILDCAT EMPIRE Abo
2300 FNL × 1642 F	FI Sor 9/1/2016	S/AL/m N/C/.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
14. PERMIT NO.	15. ELEVATIONS (Show whether DF	, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE,

16.		Check A	Appropriate Box To I	ndicate N	Nature of Notice, Report, or Other Data
	NOT	ICE OF INT	ENTION TO:		SUBSEQUENT REPORT OF:
	TEST WATER SHUT-OFF		PULL 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) Soudding
	(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.)*

On 5/12/66, 85/8" OD 24" J-55 Caoing was set @ 1520' W/ 600 sy 2% Gel+ 100 sy. Incor neal + 100 sy neal outside esq. Demens en culated

Of ter 40C 48 hours, tested easing w/ 1500ps, for 30 minutes. Jest O.K.

Leduced hole to 718" e 1520' and rester drilling

18 I haraby couttly that the day of	
18. I hereby certify that the foregoing is true and correct SIGNED ORUMBIANT TITLE AREA	DREMAN DATE 5-14-6
(This space for Federal or State office use) APPROVED BY	DATE
NSW ART ART ARMINISTER	
RESUSP REVERSE Side Instructions on Reverse Side ATCANTIC	de అద్దామం కుండి మార్క్