

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

LC-062573

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

BIG EDDY UNIT FEDERAL

8. FARM OR LEASE NAME

9. WELL NO.

16

10. FIELD AND POOL, OR WILDCAT

WILDCAT

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

18-21-29 NMPM

12. COUNTY OR PARISH

EDDY

13. STATE

N.M.

1a. TYPE OF WELL:

OIL WELL ☐GAS WELL ☐DRY ☒

Other

b. TYPE OF COMPLETION:

NEW WELL ☐WORK OVER ☐DEEP-EN ☐PLUG BACK ☐DIFF. REVR. ☐

Other

2. NAME OF OPERATOR

PAN AMERICAN PETROLEUM CORPORATION

O. C. C.

3. ADDRESS OF OPERATOR

BOX 68, HOBBS, N. M. 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface

1980' FSL x 1980' FEL SEC. 18 (Unit J, NW 1/4 SE 1/4)

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

9-14-66

16. DATE T.D. REACHED

11-28-66

17. DATE COMPL. (Ready to prod.)

12-10-66

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

3309' R.D.B.

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

12977

21. PLUG, BACK T.D., MD & TVD

Surface

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

10-TD

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Dual Induction-Laterolog; Sonic Gamma Ray, Nuclear Log

27. WAS WELL CORRED

No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13 3/8"	48 #	453'	17 1/4"	550 Sx.	
9 5/8"	36 #	3016'	12 1/4"	1150 Sx.	
4 1/2"	11.6-13.5	12720'	8 3/4"	650 Sx.	5740

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)

12448-68, 516-24, 48-76, 600-640 w/2SPF

11573-81 w/2SPF

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
12448-640	2000 gal MCA
	20,000 gal 15%

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
DATE OF TEST		HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS—MCF.
FLOW. TUBING PRESS.		CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	GRAVITY (COR.)	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

TEST WITNESSES

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE

AREA SUPERINTENDENT

DATE

4-6-67

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

043-USGS-ART

1-NSD

1-WF

1-RAH

1-STATELAND

1-NMAG-S2

RECEIVED
APR 11 1967
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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, 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.), formations, 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.

Section 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 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: Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool. (See instruction for items 22 and 24 above.)

[illegible]