

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

**SP-077967**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

**Gallagos Canyon Unit-Dakota**

9. WELL NO.

**No. 157**

10. FIELD AND POOL, OR WILDCAT

**Basin Dakota**

11. SEC., T., R., M., OR BLK. AND

**Section 35, T-28N, R-13W  
NMPH**

12. COUNTY OR PARISH

**San Juan**

13. STATE

**New Mexico**

1.

OIL ☐ GAS ☒ OTHER ☐  
WELL WELL

2. NAME OF OPERATOR

**Pan American Petroleum Corporation**

3. ADDRESS OF OPERATOR

**P. O. Box 480 Farmington, New Mexico**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)

At surface

**975' from North Line, 2510' from East Line  
Section 35, T-28N, R-13W.**

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

**5067 (RDS)**

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\*

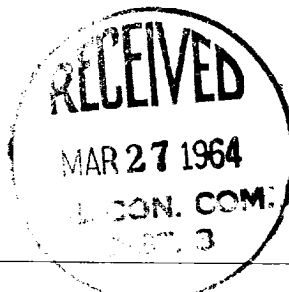
**Report of Potential test**

(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.)\*

**Potential test March 23, 1964, Flowed 7,994 MCF per day through 3/4" choke after 3 hours flow. Absolute open flow potential test 11,385 MCF per day. Shut in casing pressure after 7 days 2012 psig.**

MAR 26 1964



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

SIGNED **ORIGINAL SIGNED BY**  
**L. R. TURNER**

TITLE **Administrative Clerk**

DATE **March 24, 1964**

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

## Instructions

**General:** This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law 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.

**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 17:** Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.