Form (May	

with Li 2. NAME OF OPERATOR

3. ADDRESS OF OPERATOR

M. O. C. C. SORNIT IN DEPARTMENT OF THE INTERIOR (Other Instr. verse side)

PLICATE.

Form approved. Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SCRIAL NO.
NM-0159536 -C 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
 1111 012 JUDG _C
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

10. FIELD AND POOL, OR WILLOCK

SUFFAIO UALLEY PENN-GAS
11. SEC., T., B., M., OR BLE. AND
SURVEY OR AREA

GEOLOGICAL SURVEY					
SUNDRY	NOTICES	AND	REPORTS	ON	WELLS

Use "APPLICATION FOR PERMIT—" for such proposals.)	SI VOIF,
GIL GAS STOTHER	7. UNIT AGREEMENT NAME
NAME OF OPERATOR PAN AMERICAN PETROLEUM CORPORATION	8. FARM OR LEASE NAME FEDERAL "C" GAS COM
BOX 68, HOBBS, N. M. 88240	9. WELL NO.

990 FALX 1650 FWL Sec. 11 (UNITC, NE/A NW/A)

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

		11-15-27 NMPM
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STORE
	3493' R. D. B.	CHRUES N.M.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT	r or:
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other) MULTIPLE COMPI. ABANDON* CHANGE PLANS		WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) (NOTE: Report results of multiple Completion or Recompletion Report	ALTERING CASING ABANDONMENT*
Completion or Recompletion Report and Log form.)			

SCRIBE 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.)*

TD-8413'. On 10-27-68, 51/2" OD 14-17 & J.55 Casing was set @ 8413' W/ 350 set. Slo Set +.8% Halad 9. Tested ensing ut 2000 ps, jon 30 min. Jest O.K. Cepter NOC apper 216 hours, Pergarated 8232-43, 52-57 W/2JSPF. acid 250 Bal MCA. Evaluated. EST AOF & MMCFPD.

TO- 8413 PBD-8348'

COMP 11-10-68

NOV 1 8 1968

O. T. C.

RECEIVED NOV11 968 U. S. GEOLDGICAL SURVEY ARTESIA, NEW MEXICO

18. I haraby contifu that the family is to		
18. I hereby certify that the foregoing is true and correct SIGNED	AREA SUPERINTENDENT	DATE 11-13-68
(This space for Federal or State office use) APPROVED BY	DISTRICT ENGINEER	NOV 1 4 1968
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side