Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
N.M. 0450847

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

AUG 11 1 25 PM '65

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

7. UNIT AGREEMENT NAME

1. OIL WELL ☐ GAS WELL ☒ OTHER

8. FARM OR LEASE NAME
FEDERAL "A"

2. NAME OF OPERATOR
Pan American Petroleum Corp.

9. WELL NO.
2

3. ADDRESS OF OPERATOR
Box 68, Hobbs, N. M. 88240

10. FIELD AND POOL, OR WILDCAT
Bough San Andres

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1980' FNL x 1980' FEL, SEC. 13 (UNIT G, SW/4 NE/4)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
13-9-37E N.M.P.M.

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4122' R.D.B.

12. COUNTY OR PARISH
LEA

13. STATE
N.M.

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

NOTICE OF INTENTION 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)				(Other)			

(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.)*

In accordance w/ Form 9-331 dated 7-20-65, remedial work performed as follows:

Perforated additional interval 4758'-80' w/ 2 SPF and acidized w/ 3000 gallons. Swabbed in and evaluated:

Prior to work- well dead. After, flowed 640 MCFPD x 0 BW in 24 Hours. TP-530, 20/64" Ck.

OC-7-27-65. COMP. 8-7-65;
PBD-4122, PERFS: 4810-20
7 5/8" CSA 4267; 5½" Liner 4155-9570.

18. I hereby certify that the foregoing is true and correct
SIGNED _____ TITLE Area Supt DATE 8-9-65

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED
AUG 12 1965
J. L. GORDON
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

Orig
CM-USGS
1-JWB
1-Susp
1-w/s