

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
HOBBBS OFFICE U. S. G.

SUBMIT IN DUPLICATE

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL ☒ GAS WELL ☒ DRY ☐ Other <u>Re-enter</u>	
b. TYPE OF COMPLETION:		NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESER. ☐ Other _____	
2. NAME OF OPERATOR Pan American Petroleum Corporation			
3. ADDRESS OF OPERATOR Box 68 - Hobbs, New Mexico - 88240			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' FWL X 1900' FWL, Sec. 24, (Unit B, NW/4, NE/4) At top prod. interval reported below At total depth			
14. PERMIT NO.		DATE ISSUED	
15. DATE 4-2-64		16. DATE T.D. REACHED	
17. DATE COMPL. (Ready to prod.) 5-5-64		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4103' GL	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 9625'	
21. PLUG, BACK T.D., MD & TVD 4640'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY Rotary		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4768'-90' San Andres	
25. WAS DIRECTIONAL SURVEY MADE NO		26. TYPE ELECTRIC AND OTHER LOGS RUN None	
27. WAS WELL CORED NO		28. CASING RECORD (Report all strings set in well)	
CASING SIZE		WEIGHT, LB./FT.	
DEPTH SET (MD)		HOLE SIZE	
CEMENTING RECORD		AMOUNT PULLED	
See Original Records			
29. LINER RECORD		30. TUBING RECORD	
SIZE		TOP (MD)	
BOTTOM (MD)		SACKS CEMENT*	
SCREEN (MD)		SIZE	
DEPTH SET (MD)		PACKER SET (MD)	
See Original Records		2"	
4729'			
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
4815'-30' W/2 SPT		7000 gal acid covered with sand	
4768'-90' W/2 SPT		7000 gal acid, from 3,000 gal water & 37,000 gal 36000 lbs	
33.* PRODUCTION		WELL STATUS (Producing or shut-in)	
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	
4-28-64		Flowing	
DATE OF TEST		HOURS TESTED	
5-5-64		24	
CROCK SIZE		PROD'N. FOR TEST PERIOD	
18/64		trace	
OIL—BBL.		GAS—MCF.	
445		445	
WATER—BBL.		GAS-OIL RATIO	
42			
FLOW. TUBING PRESS.		CASING PRESSURE	
425		425	
CALCULATED 24-HOUR RATE		OIL—BBL.	
425		425	
GAS—MCF.		WATER—BBL.	
OIL GRAVITY-API (CORR.)			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		TEST WITNESSED BY	
To be sold		J. W. Terry	
35. LIST OF ATTACHMENTS			
None			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED L. J. STALL TITLE Area Superintendent DATE 5-7-64			

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

INSTRUCTIONS

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, or both, 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.), formation 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.

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 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 only 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: "Seals Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool. **Item 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS				
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
San Andres	4768	4790	Gas producing zone	See Original Records			