

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLI  
(Other instructions  
reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-0145685

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

HORTON Federal

9. WELL NO.

24

10. FIELD AND POOL, OR WILDCAT

MILNESAND San Andres

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

31-8-35 NMPM

12. COUNTY OR PARISH 13. STATE

ROOSEVELT

N. M.

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.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

PAN AMERICAN PETROLEUM CORPORATION

3. ADDRESS OF OPERATOR

BOX 68, HOBBS, N. M. 88240

NAME CHANGED:

FROM: PAN AMERICAN PETR. CORP.

TO: AMOCO PRODUCTION CO.

EFFECTIVE: 2-1-71

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

330' FNL x 2310' FEL Sec. 31 (Unit B, NW 1/4 NE 1/4)

14. PERMIT NO.

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

4220' R.D.B.

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\* ☐

(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 an effort to increase productivity well was acidized w/ 3000 gal 15% LSTNE. Evaluated.

Prior - Pump 3480 x 8BW in 24 hours.  
After - Pump 66 " x 16 " " " "

OC - 4-10-67

Comp 4-19-67

TD - 4730'

4 1/2" CSA 4730'

PAD - 4778'

PERFS - 4700'-4778'

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

SIGNED

TITLE

AREA SUPERINTENDENT

DATE

4-25-67

(This space for Federal or State office use)

APPROVED BY

TITLE

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

0+4- USGS-11  
1- NSW  
1- SUSP  
1- RRY

APR 26 1967

\*See Instructions on Reverse Side

J L GORDON  
ACTING DISTRICT ENGINEER