					6 <b>14</b> .**	e ti in	~		
Form 9-330 (Kev. 5-63)	Т	JNITLO STA	TEC	SUBN	AIT IN DUP	LICATE	For	m approved.	L to Dorr r
		IENT OF TH		FEDIO	P (	See other in-			No. 42 R355.5.
		OLOGICAL SU				reverse side)	5. LEASE DESIG		) SERIAL NO.
WELL CO		R RECOMPLE			AND L	.OG *	6. IF INDIAN, A		TRIBE NAME
18. TYPE OF WEI							7. UNIT AGREE	MENT NAME	
b. TYPE OF COM	WELL U WORK DEEP-	•	DRY	Other	EIVI				
WELL	OVER EN		SVR. 🛄 🎽	ther		<u>1</u>	S. FARM OR LE	P	/
2. NAME OF OPERA Pan Americ	can <sup>P</sup> otrolous	Corporation	v	( <b>*C</b> )	1, 192	K.	9. WELL NO.		orcon
3. ADDRESS OF OPE				4			10. FIELD AND	POOL OB WI	LDCAT
	Hobbs, New Me	learly and in accordan	ce with any	y State requ	irements)*		Milnesand		
		PEL, Sec. 3				4)	11. SEC., T., R., OR AREA		
	terval reported below			•	•		31-18-35 1	INTER	
At total depth		ME PALLA SERI	CAN P	FTR CC	RP				
At total deput		ALICCO PRODI			DATE ISSUE		12. COUNTY OR	13.	STATE
	EFFE	CTIVE: 2-1-71			•		Rooseval		w Mexico
15. DATE SPUDDED	16. DATE T.D. REAC	HED 17. DATE COMPL.	(Ready to	p prod.)   1		S (DF, RKB,	RT, GR, ETC.)*	19. ELEV. CA	SINGHEAD
9-5-64	9-15-64	ACK T.D., MD & TVD	9 IF MIL	TIFLE COMPI		INTERVALS	ROTARY TOOLS	САВ	LE TOOLS
20. TOTAL DEPTH, MD	<b>4 1VD</b> 21. PLOG, B	ACK I.D., MD & IVD	HOW M			DRILLED BY	o-TD		
		PLETION-TOP, BOTTON	I, NAME (N	ID AND TVD	)*				DIRECTIONAL Y MADE
Dry Hole									
26. TYPE ELECTRIC	AND OTHER LOGS RUN						2	7. WAS WEL	L CORED
28. CASING SIZE	WEIGHT, LB./FT.	CASING REC DEPTH SET (MD)		ort all strin	gs set in well	) Tementing	RECORD		NT PULLED
8-5/8"	24#		11		250 S	x. Cire			
-//3			_						
4-1/2*	9.5#	4808	7-7	/8=	250 9	X.			
29.	LIN	VER RECORD			30.		TUBING RECOR	D	
SIZE	TOP (MD) BO	TTOM (MD) SACKS	CEMENT*	SCREEN (	MD) 5	SIZE	DEPTH SET (MD) PACKER SET ()		R SET (MD)
								·····	
31 PERFORATION RE	CORD (Interval, size o	and number)		32.		HOT FRAC	TURE, CEMENT	SOUEFZE I	ETC.
		,		1	NTERVAL (ME	·*	AOUNT AND KIND		
4765-84 1	1/2 SPF			4765-	<u>.</u>	750	gal acid-9	queezed	· · · · · · · · · · · · · · · · · · ·
4706-12	1			4706-	12	750	gal acid-9		
4676-92	*			4676-	92	750	gal acid		
33.*			PROI	DUCTION					
DATE FIRST PRODUCT	TION PRODUCT	ION METHOD (Flowing,			e and type of	f pump)	weil st shut-i	TATUS (Prod	ucing or
DATE OF TEST	HOURS TESTED		D'N. FOR	01LBBL.	GAS	5 MCF.	WATER -BBL.	GAS-UIL	RATIO
		TES	T PERIOD				l		
FLOW. TUBING PRESS.	CANING PRESSURE	CALCULATED OIL- 24-HOUR RATE	-BBL.	GAS-	-MCF.	WATER	- BBL. C	DIL GRAVITY-A	API (CORR.)
34. DISPOSITION OF	GAS (Sold, used for fu	<u> </u>		I			TEST WITNESS	ED BY	
35. LIST OF ATTACE	IMENTS								
36. I hereby certify	v that the foregoing a	ind attached informati	on is comp	lete and cou	rrect as dete	rmined from	all available rec	ords	
		en al en estador en en	_		erint end			.0-7-64	

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

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C.
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**Severa**. This that is designed on submining a compare and correct weat comparison report and log on all types of **iands** and leases to either a 1 ederal 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 martial advected to be instructed with encoded to be indexed by the instruction of the second provide the transmission of the second provide the transmission of tr and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions. If not fiber velocity to the time this summary moved is submitted report. If an allocation is a constructed point is submitted report.

If not flow to the fine this summary more by submitted and a space for a state of a submit of solar source and surveys, should be attached herete to the event required by applicable. Pederal 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.

**Hem 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. **Hems 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), hottom(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. Hem 29: "Nacks Concol". Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool. Hem 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.) (See instruction for items 22 and 24 above.)

Mone	FORMATION	37. SUMMARY OF POR
	TESTED, CUSIDON TOP	OUS ZONES : TANT ZONES OF P
	POTTOM	DROSITY AND CONTENTS T
	FLOWING AND SHITT-IN FRESSURES, AND RECOVERIES DESCRIPTION, CONTENTS, ETC.	37. SUMMARY OF POROUS ZONES: SHOW ALL DEPORTANT ZONES OF POROSITY AND CONTENTS THEEROE; CORED INTERVALS; AND ALL DEBL-STEM TESTS, INCLUDING
Andres	NAME	38 0001
· .	MEAS, DEPTH	WILL MAR

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