

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

6. LEASE DESIGNATION AND SERIAL NO.

7. INDIAN, ALLOTTEE OR TRIBE NAME

## 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 TO DRILL" for such proposals.)

|                                                                                                                                                                                                 |                                                             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>                                                                                | 7. UNIT AGREEMENT NAME                                      |
| 2. NAME OF OPERATOR<br>PAN AMERICAN PETROLEUM CORPORATION                                                                                                                                       | 8. FARM OR LEASE NAME<br>WOLF Federal                       |
| 3. ADDRESS OF OPERATOR<br>Box 68 Hobbs, N.M.                                                                                                                                                    | 9. WELL NO.<br>5                                            |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br>1980' FNL V 660' FEL, Sec 19 (Unit H, SE 1/4 NE 1/4) | 10. FIELD AND POOL, OR WILDCAT<br>CHAUEROO San Anabes       |
| 14. PERMIT NO.                                                                                                                                                                                  | 15. ELEVATIONS (Show whether DF, RT, OR, etc.)<br>4324' RDB |
|                                                                                                                                                                                                 | 12. COUNTY OR PARISH<br>ROOSEVELT                           |
|                                                                                                                                                                                                 | 13. STATE<br>N.M.                                           |

## 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.)\*

On 11-1-66, 4 1/2" OD 9.5" J-55 Casing was set @ 4356' w/ 500 sq 12% bul + 300 sq neat. Tested Casing w/ 2100 psi for 30 minutes. Test O.K.

Perforated intervals 4107-10, 13-15, 44-46, 52-54, 70-81, 84-87, 90-95, 97-4203, 4203-05, 11-21, 64-66, 70-73, 80-83, 88-91, 96-99, 4305-08 w/ 2 TSFF. Acidized w/ 2000 gal. Frac. w/ 30000 gal. of oil, 40,500\* sand, 3000\* beads. Evaluated.

On P.T., pumped 160 BOW 5 BW in 24 hours.

TD - 4356'

PBD - 4320' Top of Pay - 4107'

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

SIGNED

TITLE

DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

APPROVED

DATE

CONDITIONS OF APPROVAL, IF ANY:

NOV 22 1966

\*See Instructions on Reverse Side

J L GORDON  
ACTING DISTRICT ENGINEER4- USGS. M  
1- NSU  
1- SUSP  
1- RRL