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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. OG-5082
7. Unit Agreement Name
8. Farm or Lease Name STATE "DO"
9. Well No. 1
10. Field and Pool, or Wildcat WILDCAT
12. County ROOSEVELT

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER DRILLING
2. Name of Operator PAN AMERICAN PETROLEUM CORPORATION
3. Address of Operator BOX 68, HOBBS, N. M. 88240
4. Location of Well UNIT LETTER P 660 FEET FROM THE SOUTH LINE AND 660 FEET FROM THE EAST LINE, SECTION 36 TOWNSHIP 8-S RANGE 34-E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

On 3-2-69, 8 5/8" OD 24-32" H 40' J-55 casing was set @ 4959 w/ 4805 x 8% Gel, Fall Set. Incon + 300 ps4 meat. After WOC 18 hours, tested casing w/ 1500 psi for 30 min. Test O.K.

Reduced hole to 7 7/8" @ 4959' and resumed drilling.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED _____	TITLE AREA SUPERINTENDENT	DATE MAR 3 1969
APPROVED BY 2. NADCC-H 1-NSW 1-SUSP 1-RBY 1-ATLANTIC	TITLE _____	DATE _____