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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 ☐ Fee ☒
5. State Oil & Gas Lease No.

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 ☐ GAS WELL ☐ OTHER- ☐	7. Unit Agreement Name
2. Name of Operator PAN AMERICAN PETROLEUM CORPORATION	8. Farm or Lease Name " " CROSBY B
3. Address of Operator Box 68, Hobbs, New Mex. 88240	9. Well No. 1
4. Location of Well UNIT LETTER I 1980 FEET FROM THE SOUTH LINE AND 660 FEET FROM THE EAST LINE, SECTION 3 TOWNSHIP 8-S RANGE 30-E NMPM.	10. Field and Pool, or Wildcat CATO San Anaris
11. Elevation (Show whether DF, RT, GR, etc.) 4105' RDB	12. County Chaves

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☒	OTHER Completion ☒

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.

TD- 3460' On 9-26-66, 4 1/2" OOG 5" J-55 casing was set @ 3460' w/ 500 # 12% Hll Incon + 300 # Hll neat. Tested casing w/ 2100 psi for 30 minutes. Test O.K. After HOC Appx 86 hours, perforated intervals: 3315-23, 42-54, 81-97, 3408-32 w/ 25PF. Acidized w/ 2000 gallons. Graced w/ 30,000 gal oil, 40,500 # Sand, 3000 # beads. Evaluated.

On PT. flw. 110 bbl x OBW in 10 hours, 30/64" ch. TPF-100.
GOR 475. Cgr 27°.

TD-3460' TPAV 3315' San Anaris
PBD-3437' Comp. 10-9-66.

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

SIGNED _____ TITLE Area Supt DATE 10-10-66

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

0+2- NMOCL-1
1- NSU
1- SUSP
1- REV