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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 Fee

5. State Oil & Gas Lease No.

7. Unit Agreement Name

8. Farm or Lease Name
WASLEY

9. Well No.
1

10. Field and Pool, or Wildcat
CATO San Andres

12. County
Charles

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

1. OIL WELL GAS WELL OTHER- **Drilling**

2. Name of Operator
FAN AMERICAN PETROLEUM CORPORATION

3. Address of Operator
Box 68, Hobbs, N.M.

4. Location of Well
UNIT LETTER **C**, **660** FEET FROM THE **North** LINE AND **1980** FEET FROM
THE **WEST** LINE, SECTION **14** TOWNSHIP **8-S** RANGE **30-E** NMPM.

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

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" 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.

*Cactus Drilg Co. spudded 12 1/4" hole 11:AM 11/2/66.
at 4:15 PM, 8 7/8" OD 24# J-55 casing was set @ 465' w/ 300 sf.
Cement circulated. After WOC 18 hours tested
casing w/ 1000 psi for 30 minutes. Test OK.
Reduced hole to 7 7/8" @ 465 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 Supt** DATE **11-4-66**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*622-NMOC-16
1-505D
1-NSD
1-RR4*