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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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>                                                                                       | NAME CHANGED:<br>FROM: PAN AMERICAN PETR. CORP.<br>TO: AMOCO PRODUCTION CO.<br>EFFECTIVE: 2-1-71 | 7. Unit Agreement Name                            |
| 2. Name of Operator<br>PAN AMERICAN PETROLEUM CORPORATION                                                                                                                                               |                                                                                                  | 8. Farm or Lease Name<br>WASLEY                   |
| 3. Address of Operator<br>BOX 68, HOBBS, N. M. 88240                                                                                                                                                    |                                                                                                  | 9. Well No.<br>2                                  |
| 4. Location of Well<br>UNIT LETTER <u>E</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM<br>THE <u>WEST</u> LINE, SECTION <u>14</u> TOWNSHIP <u>8-S</u> RANGE <u>30-E</u> NMPM. |                                                                                                  | 10. Field and Pool, or Wildcat<br>CATO San Andres |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>4119' R. D. B.                                                                                                                                         |                                                                                                  | 12. County<br>CHAVES                              |

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

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐  
OTHER ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐  
OTHER ☐

SUBSEQUENT REPORT OF:  
REMEDIAL WORK ☒  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER ☐  
ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

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.

In an effort to increase productivity  
remedial work performed as follows:

Perforated intervals 3431'-34', 3436'-39' - 3446'-69'  
w/ BJSF and selectively acidized both  
old perf & new perfs w/ 2000 gal 28%.  
Evaluated and restored to production.

Prior - pmp 15 BD + 2 BW 24 hrs.  
After - " 67 BD + 20 BW "

TD- 3570 PERFS: 3500-24, 3534-55'.  
PBD-3545 4 1/2" CSA 3570'

OC 1-12-70  
Comp 1-20-70

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 JAN 22 1970

APPROVED BY \_\_\_\_\_ TITLE SUPERVISOR DISTRICT 1 DATE 1-28-70

CONDITIONS OF APPROVAL, IF ANY:

1- SUSP