Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

NMOCC - ARTESIA
NMOCC - HOBBS
BLM - SANTA FE

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—" for such proposals.)

5. LEASE DESIGNATION AND SERIAL NO.: NM-0155494

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

1. OIL WELL [X] GAS WELL [ ] OTHER

7. UNIT AGREEMENT NAME:

2. NAME OF OPERATOR: PAN AMERICAN PETROLEUM CORPORATION

8. FARM OR LEASE NAME: CROSBY "B" Federal

3. ADDRESS OF OPERATOR: BOX 68, HOBBS, N. M. 88240

9. WELL NO.: 1

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface

1980' FNL x 1980' FEL, Sec. 9 (Unit G, SW/4 SE/4)

10. FIELD AND POOL, OR WILDCAT: CATO San Andres

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: 9-8-30-NMPM

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 4104' R.D.B.

12. COUNTY OR PARISH: CHAVES

13. STATE: N.M.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	[ ]	PULL OR ALTER CASING	[ ]	WATER SHUT-OFF	[ ]	REPAIRING WELL	[X]
FRACTURE TREAT	[ ]	MULTIPLE COMPLETE	[ ]	FRACTURE TREATMENT	[ ]	ALTERING CASING	[ ]
SHOOT OR ACIDIZE	[ ]	ABANDON*	[ ]	SHOOTING OR ACIDIZING	[ ]	ABANDONMENT*	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other)			
(Other)				(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.)*

In accordance w/ Form 9-331 submitted 9-6-67, perforated interval 3192-3246 w/2JSPF and acidized w/ 3000 gal 28%. Evaluated.

Prior - Pmp 52 BO x 11 BW 24 hours.
after - Pmp 65 BO x 43 BW 24 hours.

OC - 9-10-67
Comp. 9-18-67

TD - 3450'
PBD - 3402'
4½" CSA 3450'

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

SIGNED _____ TITLE AREA SUPERINTENDENT DATE 9-18-67

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
J. W. Luthaland
District Engineer

*See Instructions on Reverse Side

DJA - USGS - ROS
1 - NSW
1 - SUSP
1 - RRY