

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 41-R355.5.

NMOC - 10333

BLM - SANTA FE

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. LEASE DESIGNATION AND SERIAL NO.

NM-0177517

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐

2. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. REVR. ☐ Other ☐

3. NAME OF OPERATOR

PAN AMERICAN PETROLEUM CORPORATION

4. ADDRESS OF OPERATOR

BOX 68, HOBBS, N. M. 88240

5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface

660 FSL x 1980 FWL Sec 14 (UNIT N, SE 1/4 SW 1/4)

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

CATO B Federal

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

CATO San Andres

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

14-8-30 NM PM

12. COUNTY OR PARISH

13. STATE

CHAVES

N.M.

15. DATE SPUDDED

2-18-67

16. DATE T.D. REACHED

2-26-67

17. DATE COMPL. (Ready to prod.)

3-2-67

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

4161 R.D.B.

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

21. PLUG, BACK T.D., MD & TVD

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

O-TD

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

3572-3619 SAN ANDRES

25. TYPE ELECTRIC AND OTHER LOGS RUN

Focus-Density

26. WAS DIRECTIONAL SURVEY MADE?

No

27. WAS WELL CORED?

YES

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	24	460'	11"	300	
4 1/2"	9.5	3660'	7 7/8"	800	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"		

30. PERFORATION RECORD (Interval, size and number)

3572-3619 w/ 2JSPF

31. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3572-3619	3000 gal 28% acid

32.*

PRODUCTION

DATE FIRST PRODUCTION

3-2-67

PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

Flow

WELL STATUS (Producing or shut-in)

Producing

DATE OF TEST

3-3-67

HOURS TESTED

12

CHOKER SIZE

18/64

PROD'N. FOR TEST PERIOD

1/14

OIL—BSL.

11 1/4

GAS—MCF.

120

WATER—BSL.

7.8W

GAS-OIL RATIO

530

FLOW. TUBING PRESS.

200

CASING PRESSURE

300

CALCULATED 24-HOUR RATE

228

OIL—BSL.

228

GAS—MCF.

120

WATER—BSL.

7.8W

OIL GRAVITY-API (CORR.)

530

33. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Vented

TEST WITNESSED BY

34. LIST OF ATTACHMENTS

None

35. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE AREA SUPERINTENDENT

DATE 3-7-67

ACCEPTED FOR RECORD

J. N. Sathala

District Engineer

X 3 - USGS Roswell
1 - NSW
1 - WF
1 - R2Y

*(See Instructions and Spaces for Additional Data on Reverse Side)

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

4; If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in Item 22, and in Item 24 show the producing intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in Item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

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Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

1- 0154
1- 0156
1- 0157
1- 0158

* (See Instructions and Spaces for Additional Data on Reverse Side)