

NMOCC - ARTESIA
NMOCC - HOBBS
BLM - SANTA FEUNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other in-
structions on
reverse side)Form approved
Budget Bureau No. 42 B-6665

5. LEASE DESIGNATION AND SERIAL NO.

NM-0177517

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. REVER. ☐ Other _____

2. NAME OF OPERATOR

PAN AMERICAN PETROLEUM CORPORATION

3. ADDRESS OF OPERATOR

BOX 68, HOBBS, N. M. 88240

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

At surface

660' FSL x 660' FWL Sec. 14 (Unit M, S. S. GEOLOGICAL SURVEY
At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUNDED 7-11-67

16. DATE T.D. REACHED 7-17-67

17. DATE COMPL. (Ready to prod.) 7-21-67

18. ELEVATIONS (OF, RKB, RT, GR, ETC.)* 4170' R.D.B.

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 3670

21. PLUG BACK T.D., MD & TVD 3642

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

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

25. WAS DIRECTIONAL
SURVEY MADE26. TYPE ELECTRIC AND OTHER LOGS RUN
3503'-3604' San Anarais
Gamma Ray-Neutron27. WAS WELL CORED
No
No

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 #	285'	12 1/4"	250 CY	
4 1/2"	9.5 #	3670'	7 7/8"	300 CY	

29. LINER RECORD

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

31. PERFORATION RECORD (Interval, size and number)

3503-34, 55-3604 W/2JS PF

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3503-3604	6000 gal 28%

33.*

PRODUCTION

DATE FIRST PRODUCTION 7-21-67

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

WELL STATUS (Producing or shut-in) PRODUCING

DATE OF TEST 7-24-67

HOURS TESTED 24

CHOKE SIZE 12/64

PROD'N. FOR TEST PERIOD

OIL—BBL. 288

GAS—MCF. 138

WATER—BBL. 72

GAS-OIL RATIO 480

FLOW. TUBING PRESS. 250

CASING PRESSURE -

CALCULATED 24-HOUR RATE

OIL—BBL.

GAS—MCF.

WATER—BBL.

OIL GRAVITY-API (CORR.) NA

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

Vent

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

None

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

SIGNED

TITLE AREA SUPERINTENDENT

DATE 7-25-67

3-UGGS-ROS
1-NSW
1-WF
1-RRY

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

ACCEPTED FOR RECORD

J. N. Luthard, Jr.
District Engineer

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all leases 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 in the instructions 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.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal regulations. (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 interval, or 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.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

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.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	CLASS, DEPTH	TOP
San And	3503	3604	Oil & Gas producing zone	Yalla	1610	
				Queen	2273	
				San And	2775	