

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIP
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.NM00C - ARTESIA
NM00C - HOBBS
BLM - SANTA FE

SUMMARY 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-0177517

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

AM '67

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

CATO B. Federal

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

CATO San Andres

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

14-8-30 NMPM

12. COUNTY OR PARISH

CHAVES

13. STATE

N.M.

1. OIL WELL ☒ GAS WELL ☐ 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.*
See also space 17 below.)
At surface

660' FSL x 660' FWL Sec. 14 (Unit M) (SW 1/4 SW 1/4)

14. PERMIT NO.

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

4170' R. D. B.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☒FRACTURE TREATMENT ☐SHOOTING ACIDIZING ☐(Other) ☒(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐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 perti-
nent to this work.)*

On 7-17-67, 4 1/2" OD 9.5" J-55 Casing was set @ 3670'
w/300 sd Incon Meq. Tested casing w/ 2000 psi
for 30 minutes. Test ok. Perforated intervals
3503-34, 59-3604' w/ 2JSPF. Acidized w/ 6000
gal 28%. Evaluated.

On PT, flowed 288 BO x 72 BW in 24 hours thru
1 1/4" Choke, TPF-250 GOR 480, 138 MCFG.

TD- 3670

PBD- 3642

TPAY- 3503 San Andres

Comp. 7-25-67

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

SIGNED

TITLE

AREA SUPERINTENDENT

DATE

7-25-67

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

4- USGS- ROS
1- NSW
1- SUSP
1- RRY

ACCEPTED FOR RECORD

J. N. Luthela

District Engineer

*See Instructions on Reverse Side