

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-11624.

NMOCC - ARTESIA

NMOCC - 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 a well. (Different user.)
Use "APPLICATION FOR PERMIT—" for such proposals.

5. LEASE DESIGNATION AND SERIAL NO.
NM-0354427-A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

GRIMA Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDLAND

CATO San And

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

9-8-30 NMPM

12. COUNTY OR PARISH 13. STATE

CHAVES NM

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

1980' FSL x 1980' FEL Sec 9 (UNIT 1, NW 1/4 SE 1/4)

14. PERMIT NO.

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

4054' 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 OR ACIDIZING ☒

(Other) ☐

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 pertinent to this work.)

*In accordance w/ Form 9-331 dated 7-19-67.
remedial work as follows:*

*Acidize 12 perfs 3210'-3243' w/ 2500 gal 28%.
Evaluated out an evaluated.*

*Fraced perfs 3210'-3331' w/ 40,000 gal gel brine,
42,353 # sand. Evaluated.*

*Prior - Pump 33 BW + 1 BW 24 hours.
after - Pump 24 BW + 6 BW 24 hours*

*OC-7-8-67 workover - unsuccessful
Comp-8-14-67*

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

SIGNED

K. H. H. H.

TITLE

Area Engineer

DATE

8-15-67

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*2-3- USGS-ROS
1- NSIO
1- SUSP
1- RRY*

*See Instructions on Reverse Side

ACCEPTED FOR RECORD

J. W. Luthel