

NMOCC - ARTESIA
NMOCC - HOBBS
BLM - SAN ANTONIO

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved,
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____		7. UNIT AGREEMENT NAME AM-17 757 56 AM '67																			
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		8. FARM OR LEASE NAME CATO B Federal																			
2. NAME OF OPERATOR PAN AMERICAN PETROLEUM CORPORATION		9. WELL NO. 8																			
3. ADDRESS OF OPERATOR BOX 68, HOBBS, N. M. 88240		10. FIELD AND POOL, OR WILDCAT CATO San Andres																			
4. LOCATION OF WELL (Report location clearly and in accordance with any State regulations) At surface 1980' FNL x 1980' FWL Sec. 23 (Unit F. S. SE 1/4, T. 23N, R. 10E, S. 36E, NEW MEXICO) At top prod. interval reported below At total depth		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA 23-8-30 NMPM																			
14. PERMIT NO. _____ DATE ISSUED _____		12. COUNTY OR PARISH CHAUDES																			
15. DATE DRILLED 8-4-67		16. DATE T.D. REACHED 8-4-67																			
17. DATE COMPL. (Ready to prod.) 8-4-67		18. ELEVATIONS (DF, RKB, RT, GR, ETC.) 4202' R.D.B.																			
19. ELEV. CASINGHEAD —		20. TOTAL DEPTH, MD & TVD 3697																			
21. PLUG, BACK T.D., MD & TVD 3671		22. IF MULTIPLE COMPL., HOW MANY* —																			
23. INTERVALS DRILLED BY —		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3550' - 3589' San Andres																			
25. WAS DIRECTIONAL SURVEY MADE NO		26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray - Neutron																			
27. WAS WELL CORED NO		28. CASING RECORD (Report all strings set in well)																			
<table border="1"> <thead> <tr> <th>CASING SIZE</th> <th>WEIGHT, LB./FT.</th> <th>DEPTH SET (MD)</th> <th>HOLE SIZE</th> <th>CEMENTING RECORD</th> <th>AMOUNT PULLED</th> </tr> </thead> <tbody> <tr> <td>8 5/8"</td> <td>24 #</td> <td>230'</td> <td>12 1/4</td> <td>250 Sx</td> <td></td> </tr> <tr> <td>4 1/2"</td> <td>9.5 #</td> <td>3697'</td> <td>7 7/8</td> <td>300 Sx</td> <td></td> </tr> </tbody> </table>		CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED	8 5/8"	24 #	230'	12 1/4	250 Sx		4 1/2"	9.5 #	3697'	7 7/8	300 Sx			
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31. PERFORATION RECORD (Interval, size and number) 3550-3589 w/ 2SPF		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. <table border="1"> <thead> <tr> <th>DEPTH INTERVAL (MD)</th> <th>AMOUNT AND KIND OF MATERIAL USED</th> </tr> </thead> <tbody> <tr> <td>3550-3589</td> <td>3000 gal 28 %</td> </tr> </tbody> </table>		DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED	3550-3589	3000 gal 28 %														
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33. PRODUCTION																					
DATE FIRST PRODUCTION 8-13-67		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) FLOWING																			
DATE OF TEST 8-13-67		WELL STATUS (Producing or shut-in) PRODUCING																			
HOURS TESTED 17	CHOKE SIZE 18/64	PROD'N. FOR TEST PERIOD —																			
FLOW, TUBING PRESS. 70	CASING PRESSURE 400	OIL—BBL. 237	GAS—MCF. 124																		
CALCULATED 24-HOUR RATE —	OIL—BBL. 335	GAS—MCF. 175	WATER—BBL. —																		
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 Engineer

DATE

8-15-67

ACCEPTED FOR RECORD

J. W. Luthman

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

043-0545-Ros
1-NSW
1-WF

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and for 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 will be included in the instructions of copies of the form submitted, particularly with regard to local, area, or regional procedures and practices, either as 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 25, below regarding separate reports for separate completion.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drill, geologic, sample and core analysis, all types of logs, 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 attached logs should be listed on this form, see item 25.

Item 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 12: Indicate which elevation is used as reference (where noted twice 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, use (multiple completion), so state in item 22 and in item 24 of the production 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: "Stacks Count": 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 DEEP-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	THREE VERT. FEET
<i>Sp. Lm.</i>	<i>3550</i>	<i>3589</i>	<i>Oil to base Sand Zone.</i>	<i>Yates</i>	<i>1690</i>		
				<i>Quartz</i>	<i>2300</i>		
				<i>SA</i>	<i>2855</i>		