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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State ☐ Fee ☒
5. State Oil & Gas Lease No.

SUNDRY 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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Unit Agreement Name
2. Name of Operator PAN AMERICAN PETROLEUM CORPORATION	8. Farm or Lease Name CROSBY "8"
3. Address of Operator BOX 68, HOBBS, N. M. 88240	9. Well No. 2
4. Location of Well UNIT LETTER <u>P</u> <u>660</u> FEET FROM THE <u>SOUTH</u> LINE AND <u>660</u> FEET FROM THE <u>EAST</u> LINE, SECTION <u>3</u> TOWNSHIP <u>8-S</u> RANGE <u>30-E</u> NMPM.	10. Field and Pool, or Wildcat CATO SAN ANDRES
15. Elevation (Show whether DF, RT, GR, etc.) 4109 R.D.B.	12. County CHAVER

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☒	OTHER <u>Completion Operations</u> ☒

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1108.

On 10-26-67, 4 1/2" OD 9.5# 1-55 casing was run and set @ 3498' w/ 300 sq. Incon. Tested casing at 800 psi for 30 min. Test O.K. after HOC appl. 100 hours. Perforated intervals 3320-23, 27-29, 32-64, 66-68, 3390-3425, 29-39 w/ 2SPF. Acidized w/ 6000 gal 20%. Evaluation.

PT- Swab 143 BOX 70 BLW- 24 hours. 68 MCF6, 60R 473, Cgr. 26°.

TD-3498
PBD-3467

TPH 3320
San Andres.

Comp. 11-1-67

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED <u>[Signature]</u>	TITLE AREA SUPERINTENDENT	DATE <u>11-3-67</u>
APPROVED <u>[Signature]</u>	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		