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# NEW MEXICO OIL CONSERVATION COMMISSION

Nov 17 8 23 AM '67

Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Firm or Lessee Name <b>WASLEY</b>
9. Well No. <b>8</b>
10. Field and Pool, or Wildcat <b>CATO SAN ANDRES</b>
12. County <b>CHAVES</b>
19. Proposed Depth <b>3700'</b>
19A. Formation <b>San Andres</b>
20. Rotary or C.T. <b>Rotary</b>
21. Elevation (Show whether DF, RT, etc.) <b>NYA</b>
21A. Kind & Status Plug. Bond <b>BLANKET-DY FILE</b>
21B. Drilling Contractor <b>NYA</b>
22. Approx. Date Work will start <b>11-25-67</b>

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>	2. Name of Operator <b>PAN AMERICAN PETROLEUM CORPORATION</b>	3. Address of Operator <b>BOX 68, HOBBS, N. M. 88240</b>	4. Location of Well UNIT LETTER <b>H</b> LOCATED <b>1980</b> FEET FROM THE <b>NORTH</b> LINE AND <b>660</b> FEET FROM THE <b>EAST</b> LINE OF SEC. <b>14</b> TWP. <b>8-S</b> RGE. <b>30-E</b> NMPM
23.			

## PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/4" - 11"	8 5/8"	24#	300'	Cnc	Surface
7 7/8"	4 1/2"	9.5#	3700'	300	2500

THIS COMMISSION MUST BE NOTIFIED  
OF ANY CHANGE IN THE PROPOSED PROGRAM

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IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTION ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

Signed \_\_\_\_\_ Title **AREA SUPERINTENDENT** Date **11-16-67**

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

4-NMOC-11  
1-NSW  
1-SUSD