

UNITED STATES  
DEPARTMENT OF THE INTERIORSUBMIT IN TRI  
(Other instruction  
verse side)DATE  
on re-Form approved.  
Budget Bureau No. 42-R1424.GEOLOGICAL SURVEY  
OFFICE O. C. C.

## SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or deepen wells having different reservoir.  
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> DRILLING	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR PAN AMERICAN PETROLEUM CORPORATION	8. FARM OR LEASE NAME CATO "C" Federal
3. ADDRESS OF OPERATOR BOX 68, HOBBS, N. M. 88240	9. WELL NO. 4
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FSL* 660' FEL Sec. 14 (P, SE 1/4 SE 1/4)	10. FIELD AND POOL, OR WELL CATO San Andres
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)
11. SEC., T., B., M., OR BLK. AND SURVEY OR AREA 14-8-30 NMPM	12. COUNTY OR PARISH CHAVES
13. STATE NM	

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
(Other) <i>Spudding</i> <input checked="" type="checkbox"/>	

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

## 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.)\*

ARD Drilling Co. spudded 11" hole 4:PM 5-14-69.  
On 5-15-69 (1:AM) 8 5/8" OD 24" J-55 casing was  
set @ 290' w/ 250.04 Incon metal + 2% CACL.  
Cement Circulated. After HOC 18 hours tested  
casing w/ 1000 psi for 30 min. Test O.K.

Reduced hole to 7 7/8" @ 290' and resumed  
drilling.

RECEIVED  
MAY 19 1969GEOLOGICAL SURVEY  
MEXICO

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

SIGNED

*Ch. Williams*

TITLE

*Area Foreman*

DATE

*5/16/69*

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

0+4- USGS-ART  
1- NSW  
1- SUSP  
1- RRY

APPROVED  
MAY 17 1969  
R. L. BECKMA

See Instructions on Reverse Side