| NO. OF COPIES RECEIVED  | 1   | <b>y</b>                                  | Form C-103                              |
|---|---|---|---|
| DISTRIBUTION  |   |   | Supersedes Old<br>C-102 and C-103       |
| SANTA FE  | NEW MEXICO OIL CONS                         | ERVATION COMMISSION                       | Effective 1-1-65                        |
| FILE  |   |   | Con Judicata Tima of Large              |
| U.S.G.S.  |   |   | State   Fee   Fee                       |
| LAND OFFICE   |   |   | State State Oil & Gas Lease No.         |
| OPERATOR  | ا   |   | 5. State Off & Gas Lease No.            |
|   |   |   | mmmmmm                                  |
| 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.) |   |   |   |
| OIL GAS WELL WELL   | OTHER- DEPLETE                              | ED  | 7. Unit Agreement Name                  |
| 2. Name of Operator   |   |   | WINGERD                                 |
| PAN AMERICAN PEROLEUM CORPORATION  3. Address of Operator  3. Address of Operator   |   |   | 9. Well No.                             |
| BOX 68, HUDDS, IN. IM. 80240  |   |   | 10. Field and Pool, or Wildcat          |
| 4. Location of Well UNIT LETTER O 6   | 60 FEET FROM THE SOUTH                      | LINE AND                                  | 1                                       |
| THE EAST_LINE, SECT   | 27 (7                                       | -S RANGE 37-E NMPM.                       |   |
| THE LINE, SECT  | · · · · · · · · · · · · · · · · · · ·       |   |   |
|   | 15. Elevation (Show whether                 |   | 12. County<br>LEA                       |
| 16.   |   |   | <del></del>                             |
|   | Appropriate Box To Indicate NINTENTION TO:  |   | REPORT OF:                              |
| :   |   |   |   |
| PERFORM REMEDIAL WORK   | PLUG AND ABANDON                            | REMEDIAL WORK                             | ALTERING CASING                         |
| TEMPORARILY ABANDON   |   | COMMENCE DRILLING OPNS.                   | PLUG AND ABANDONMENT                    |
| PULL OR ALTER CASING  | CHANGE PLANS                                | CASING TEST AND CEMENT JOB                |   |
| •   | Ш   | OTHER                                     |   |
| OTHER   |   |   |   |
| 17. Describe Proposed or Completed C  | Operations (Clearly state all pertinent det | ails, and give pertinent dates, including | estimated date of starting any proposed |
| work) SEE RULE 1103.  |   | 2   | 2010                                    |
| Inysical avar   | edonomina of ha                             | a completed                               | 2-9-68.                                 |
| South last  | idonment of ha                              |   | 1.01                                    |
| Especial corner   | u puigo + qu                                | ua casing a                               | s fillous.                              |
| 25 01 6   | 0800, (001/20                               | 2700 9/89)                                |   |
| 5) Sept & 9000 (1875 9 188 - 1680)  |   |   |   |
| Shak 9810 1200 USD USD ON 1 AULICA from 857'  |   |   |   |
| 25 04 @ 9800' (Perfs 9788-9688)  Shat and pulled 7" Cabing from 3978  Shat 9% @ 1750, 1450, 1150, land pulled from 857'  25 04 @ 3978'.   |   |   |   |
| 255x @  | 350   | •   |   |
| 1 7   | 1 22 <b>0</b> 1                             |   |   |
| 10 \$x  | @ Surface & erect                           | P. Amarken.                               |   |
| 10 72   | e sugar : pur                               |   | •                                       |
|   | u   |   | •                                       |
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|   | •   |   |   |
|   |   |   |   |
|   | ·   |   |   |
|   |   |   |   |
|   |   |   |   |
| 18. I hereby certify that the information   | on above is true and complete to the best   | of my knowledge and belief.               |   |
|   | 1   |   |   |
|   | >   | AREA SUPERINTENDENT                       | DATE 3-20-68                            |
| SIGNED  |   |   |   |
| 0+2 14mac 11 //   | <i>(</i> )                                  |   | ) 10 <b>4</b> 0-0                       |
| INSW Coffee.  | Mungan TITLE                                |   | DATE                                    |
| CONDITIONS OF APPROVAL, IF AN   |   |   |   |
|   | 44: 0                                       |   | •                                       |
| 1-RRY   |   |   |   |