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NEW MEXICO OIL CONSERVATION COMMISSION

MAY 22 1 30 PM '69

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

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
L-986	
7. Unit Agreement Name	
8. Farm or Lease Name	
STATE "DM"	
9. Well No.	
1	
10. Field and Pool, or Wildcat	
PALM NORTH UPPER P	
12. County	
LEA	

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator
PAN AMERICAN PETROLEUM CORPORATION
3. Address of Operator
BOX 68, HOBBS, N. M. 88240
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>18</u> TOWNSHIP <u>13-S</u> RANGE <u>33-E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)
4298 R. D. 13.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <u>Completion Operations</u> <input checked="" type="checkbox"/>

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 1103.

On 4-23-69, 5 1/2" OD 14-17" J-55 + N-80 Casing was set @ 9874' w/ 300.04 cement. Tested casing w/ 1600 psi, for 30 min. Test O.K. After M. O. C 48 hrs appx. perforated intervals 9685-87, 9701-06, 13-22, 28-32, 35-38, 85-89, 93-97, 9801-05, 9836-40' w/ 2JSPF. Acidized w/ 10,000 gals. 15% LSTNE and 6000 gals. 28%. Swabbed and Evaluated.

PT - PMP 154 BD x 250 BW 24 hrs.

TD - 9874  
PBD - 9862'  
FND - 4-27-69  
Comp - 5-19-69

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

SIGNED	TITLE	DATE
<i>[Signature]</i>	AREA SUPERINTENDENT	MAY 21 1969
APPROVED BY	TITLE	DATE
<i>[Signature]</i>	SUPERVISOR DISTRICT	MAY 23 1969
CONDITIONS OF APPROVAL, IF ANY:		
FRRV		