

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate  
(Other instructions on  
reverse side)

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— for such proposals.)

|                                                                                                                                        |  |                                                               |  |
|----------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------|--|
| 1. NAME OF OPERATOR<br>PACIFIC AMERICAN PETROLEUM CORPORATION                                                                          |  | 2. ADDRESS OF OPERATOR<br>BOX 68, HOBBS, N. M. 88240          |  |
| 3. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.<br>See also space 17 below.)<br>At surface |  | 4. DATE AND TIME OF REPORT<br>13-11-64 11:00 PM               |  |
| 5. PERMIT NO.                                                                                                                          |  | 6. ELEVATIONS (Show whether DF, ST, GS, etc.)<br>3345' R.D.B. |  |

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

| NATURE OF INTERACTION TO: |                          | NATURE OF INTERACTION FROM: |                                     |
|---------------------------|--------------------------|-----------------------------|-------------------------------------|
| WATER SHUT-OFF            | <input type="checkbox"/> | WATER SHUT-OFF              | <input type="checkbox"/>            |
| FRACTURE TREAT            | <input type="checkbox"/> | FRACTURE TREATMENT          | <input type="checkbox"/>            |
| SHOOT OR ACIDIZE          | <input type="checkbox"/> | SHOOTING OR ACIDIZING       | <input type="checkbox"/>            |
| REPAIR WELL               | <input type="checkbox"/> | (Other)                     | <input type="checkbox"/>            |
| PULL OR ALTER CASING      | <input type="checkbox"/> | REPAIRING WELL              | <input type="checkbox"/>            |
| MULTIPLE COMPLETE         | <input type="checkbox"/> | REPAIRING CASING            | <input type="checkbox"/>            |
| ABANDON*                  | <input type="checkbox"/> | ABANDONING*                 | <input checked="" type="checkbox"/> |
| CHANGE PLANS              | <input type="checkbox"/> |                             |                                     |

(Other)

17. DESCRIBE BRIEFLY THE OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including completion or recompletion dates, and give pertinent data, including true vertical depths for all casings and logs pertinent to this work.)

Well abandoned 11-20-63  
Per logs follows:  
Gashed Hole w/ mud.  
Set 50% cement plug 730 324-2442 (from surface)  
Shot 4 1/2" @ 375' & 345', and gashed.  
25 24 @ 345' (4 1/2" casing stub).  
25 24 @ 290' (3 1/2" CSA 290)  
10 24 @ surface w/ P & A markers.  
Final cleanup made.

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

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

(This space for Federal or State office use)

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

CONDITIONS OF APPROVAL, IF ANY:

004-4844-N  
1-11-64  
1-11-64  
1-11-64  
1-11-64

FEB 2 1974

J. L. GORDON  
DISTRICT ENGINEER