

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Pan American Petroleum Corporation		Plains Unit
3. ADDRESS OF OPERATOR Box 68, Hobbs, New Mexico		8. FARM OR LEASE NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  1980' FNL X 660' FWL, Section 28 (Unit E, SW/4 of NW/4)		9. WELL NO. 2
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Lusk Strawn
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3581' RDB		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 28-19-32 NMPM
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		12. COUNTY OR PARISH Lea
		13. STATE New Mexico

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input checked="" type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <input 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.)\*

In an effort to increase productivity we propose to perforate additional Strawn zones 11,492-96; 11,501-09; 11,522-28 X 4 SPF and acidize with 10,000 gallons of retarded acid in two stages with 150# crushed moth balls between stages.

TD - 12,996'; PBD - 12,715'; 7"CSA 12,765' Packer 11,700'

Test 4-12-65 FLW 125 BO X OBW 24 hours

Pursuant to telephone authority of 5-18-65, G. D. Brown to R. R. Yoakum

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

ORIGINAL SIGNED BY

SIGNED V. E. STALEY

TITLE Area Superintendent

DATE 5-19-65

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side

