

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL ☐	GAS WELL ☐	DRY ☐	Other ☐		
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☒	DIFF. RESVR. ☐	Other ☐
2. NAME OF OPERATOR Pan American Petroleum Corporation						5. LEASE DESIGNATION AND SERIAL NO. 062514-A	
3. ADDRESS OF OPERATOR Box 68 - Hobbs, New Mexico						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' FM X e Lines, Sec. 20, (Unit G, SW/4 NE/4)						7. UNIT AGREEMENT NAME	
At top prod. interval reported below						8. FARM OR LEASE NAME M. Featherstone-Federal	
At total depth						9. WELL NO. 1	
14. PERMIT NO.						10. FIELD AND POOL, OR WILDCAT Wildcat	
DATE ISSUED						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA 20-18-13 NMPN	
15. DATE SPUNDED 8-30-63						12. COUNTY OR PARISH Lea	
16. DATE T.D. REACHED 10-16-63						13. STATE New Mexico	
17. DATE COMPL. (Ready to prod.)						19. ELEV. CASINGHEAD	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3836' RMB							
20. TOTAL DEPTH, MD & TVD 5050'		21. PLUG, BACK T.D., MD & TVD 11-19-63		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY 10-1405	ROTARY TOOLS 1405'-5050'
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*						25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Log, Formation Density Log						27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED	
13-3/8"	35.6	332'	17-1/4	Circulated			
5-1/2"	9.5	3210'	8"	200 Sx		2397	
29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
31. PERFORATION RECORD (Interval, size and number) 3014-34 W/2 8PT				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
				DEPTH INTERVAL (MD)			
				AMOUNT AND KIND OF MATERIAL USED			
				3014-34			
				500 gal acid & 3-0-F 30,000			
				gal oil & 45,000/ m &			
				3,000/ glass beads.			
33.* PRODUCTION Dry Hole							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY	
35. LIST OF ATTACHMENTS							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED V. E. STAIN		TITLE Area Superintendent				DATE 12-4-63	

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

Item 4: If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 18: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 22 and 24: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. Interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES:		38. GEOLOGIC MARKERS	
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES		NAME	MEAS. DEPTH
FORMATION	TOP	NAME	MEAS. DEPTH
No zones of porosity present	BOTTOM	Yates	3028
		Queen	4170
		San Andres	4785