

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

AUG 29 10 50 AM '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. A 1513
7. Unit Agreement Name
8. Farm or Lease Name STATE "G"
9. Well No. 5
10. Field and Pool, or Wildcat HOBBS DRINKARD
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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- DRILLING
2. Name of Operator PAN AMERICAN PETROLEUM CORPORATION
3. Address of Operator BOX 68, HOBBS, N. M. 88240
4. Location of Well UNIT LETTER E , 1980' FEET FROM THE NORTH LINE AND 660 FEET FROM THE WEST LINE, SECTION 33 TOWNSHIP 18-S RANGE 38-E N.M.P.M.
15. Elevation (Show whether DF, RT, GR, etc.) 3657' R.D.B.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

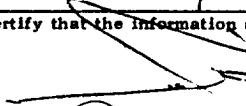
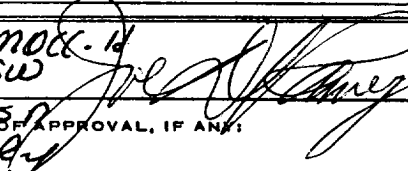
SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☒
CASING TEST AND CEMENT JOB ☒
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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 1108.

Bandera Dring Co. spudded 17 1/2" hole 5:15 AM on 8-23-69. On 8-24-69 13 3/8" OD 48" H-40 casing was set @ 425' and cemented w/ 400 sg Incon neat + 2% CACK. Cement circulated. After 140 c 18 hours, tested casing w/ 600 psi for 30 min. Test O.K. Reduced hole to 12 1/4" @ 425' & resumed dring.

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

SIGNED 	TITLE AREA SUPERINTENDENT	DATE AUG 26 1969
APPROVED BY 	TITLE SUPERVISOR DISTRICT	DATE AUG 28 1969
CONDITIONS OF APPROVAL, IF ANY:		

0+2- NMOCK-14
1-NSW
1-SUSP
1-RA