

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 42-R1424.
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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME PLAINS UNIT Federal	
2. NAME OF OPERATOR PAN AMERICAN PETROLEUM CORPORATION		8. FARM OR LEASE NAME	
3. ADDRESS OF OPERATOR BOX 68, HOBBS, N. M. 88240		9. WELL NO. 10	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FSL x 1980' FWL Sec. 28 (Unit N, SE 1/4 SW 1/4)		10. FIELD AND POOL, OR WILDCAT LUSK - Delaware	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 28-19-32 N M P M	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3574' R. D. B.		12. COUNTY OR PARISH 13. STATE LEA N. M.	

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

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 type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input checked="" type="checkbox"/>	CHANGE PLANS <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 propose to perforate an additional Delaware zone 4814-30, acidize w/ 750 gal. Evaluate, and possibly Frac w/ 10,000 gal oil + 15,000# sand. Further evaluate and restore to production.

TD - 4895'
PBD - 4893'
4 1/2" CSA 4895'
PERFS: 4719-29

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

SIGNED _____ TITLE **AREA SUPERINTENDENT** DATE **JAN 14 1970**

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

04-1- USGS-H
1- AC
1- CUSP
1- RRY

*See Instructions on Reverse Side

