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NEW MEXICO OIL CONSERVATION COMMISSION

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"/>
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5. State Oil & Gas Lease No.

A-1212

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator PAN AMERICAN PETROLEUM CORPORATION	8. Farm or Lease Name STATE A-2
3. Address of Operator BOX 68, HOBBS, N. M. 88240	9. Well No. 14
4. Location of Well UNIT LETTER N 660 FEET FROM THE SOUTH LINE AND 1980 FEET FROM THE WEST LINE, SECTION 4 TOWNSHIP 19-S RANGE 38-E NMPM.	10. Field and Pool, or Wildcat HOBBS GSA
15. Elevation (Show whether DF, RT, GR, etc.) 3606' B.F.	12. County LEA

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	

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 1103.

In an effort to increase production and reduce high GOR remedial work performed as follows:

Abandoned Zone III by setting a retrievable BP@ 4080 (Plugs: 4170-84). Perforating Zone I interval 4053-58 w/ 2 1/2" SPF. and acidized w/ 500 gal 15% LSTNE. Evaluated.

after - Pmp 38 B0x 109 BW-24 hr.
Prior Pmp 10 B0x 20 BW-24 hr.

TD-4216'
PBD-4080'

OC-G-16-69
Comp-10-13-69

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 OCT 13 1969
APPROVED BY	TITLE SUPERVISOR DISTRICT	DATE
CONDITIONS OF APPROVAL, IF ANY:		