HOBBS OFFICE O.C.C.

NEW MEXICO OIL CONSERVATION COMMISSION   Mar 15 10 24 AM '66

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

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

5a. Indicate Type of Lease

State ☐   Fee ☒

b. State Oil & Gas Lease 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 —" (FORM C-101) FOR SUCH PROPOSALS.)

1.

OIL WELL ☒   GAS WELL ☐   OTHER-

7. Unit Agreement Name

2. Name of Operator

PAN AMERICAN PETROLEUM CORP

8. Farm or Lease Name

D.E. HOUSE A

3. Address of Operator

BOX 68, HOBBS, N.M. 88240

9. Well No.

1

4. Location of Well

UNIT LETTER I , 1980 FEET FROM THE SOUTH LINE AND 660 FEET FROM

THE EAST LINE, SECTION 11 TOWNSHIP 20-S RANGE 38-E NMPM.

10. Field and Pool, or Wildcat

HOUSE SAN ANDRES

15. Elevation (Show whether DF, RT, GR, etc.)

3579' - R.D.B.

12. County

LEA

16.

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 ☐

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 ☐

OTHER_____ ☐

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 productivity, well was fraced w/ 40,000 gal of gelled water.

After Frac: Flowed 9 Box 13 BLW in 24 hr on Intermitter.
Before : Pumped 6 Box 11 BW " " " .

OC 2-1-66   TD-4438   5½" CSA 4438 × 250 SY
COMP 3-10-66   PBD-4434   2" Tbg @ 4275.
                            Perfs: 4276-90, 4307-28,
                            4362-86 4406-30

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

SIGNED _____   TITLE Area Supt   DATE 3-11-66

O+2-NMOCC-11
1-WB
APPROVED BY _____   TITLE _____   DATE _____
1-SUSP
CONDITIONS OF APPROVAL, IF ANY: