

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

NEW MEXICO OIL CONSERVATION COMMISSION

JUL 17 11 52 AM '69

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

5a. Indicate Type of Lease State ☒ Fee ☐
5. State Oil & Gas Lease No. B-1657
7. Unit Agreement Name
8. Farm or Lease Name STATE "C" TRACT 11
9. Well No. 4
10. Field and Pool, or Wildcat HARDY BUREAU-EXT. UNDESIGNATED
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 ☐ GAS WELL ☐ OTHER- ☐
2. Name of Operator PAN AMERICAN PETROLEUM CORPORATION
3. Address of Operator BOX 68, HOBBS, N. M. 88240
4. Location of Well UNIT LETTER O , 3300 FEET FROM THE SOUTH LINE AND 1980 FEET FROM THE EAST LINE, SECTION 2 , TOWNSHIP 21-S , RANGE 36-E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3524' R D B

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	COMMENCE DRILLING OPNS. ☐
PULL OR ALTER CASING ☐	CASING TEST AND CEMENT JOB ☒
OTHER ☐	OTHER Completion ☒
PLUG AND ABANDON ☐	ALTERING CASING ☐
CHANGE PLANS ☐	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 1103.

(1-55)
On 6-24-69, 4 1/2" OD 9.5" Casing was set @ 6350' w/ 2005x Incon
1/4 #15 FLOREAL + 1 1/2 CFR-2 & 2005x Incon + 1 1/2 CFR-2.
TCMT 4800'. Tested casing w/ 1500 psi for 30 min.
Test O.K. After M.O.C. appx. 72 hrs. perforated
interval, 5753, 63, 77, 94, 5805, 08, 31, 33, 39, 55, 62, 99, 5923, 39, 44,
6017, 37, 6113 w/ 11SPF. Acidized w/ 2300 gal 15%. Graced w/ 45000 gal
brine w/ 40,000 # Sand. Evaluated.

PT- Pumped 32 BO & 57 BW 24 hrs. cgr 43°. GOR NA.

TD- 6350'
ABD- 6279'

Comp 7-16-69

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 7-16-69
APPROVED BY	TITLE SUPERVISOR DISTRICT C	DATE JUL 18 1969
CONDITIONS OF APPROVAL, IF ANY: 1- NSW 1- SUSP 1- RRY		