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OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

SEP 23 8-63 AM '67

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. B-9612
7. Unit Agreement Name
8. Farm or Lease Name STATE "T"
9. Well No. 1Y
10. Field and Pool, or Wildcat SOUTH PADDOCK
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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator PAN AMERICAN PETROLEUM CORPORATION
3. Address of Operator BOX 68, HOBBS, N. M. 88240
4. Location of Well UNIT LETTER K 2080 FEET FROM THE SOUTH LINE AND 1880 FEET FROM THE WEST LINE, SECTION 32 TOWNSHIP 22-S RANGE 38-E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3403' RDB

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <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 productivity
addressed w/ 1500 gal 15% LSTNE. Evaluated
and restored to production.

Prior - Pump 33 BW x 2 BW 24 hours.
After - Pump 90 BW x 11 BW 24 hours.

TD 5803'
PAD 5210'
4 1/2" CSA 5803'
DGRFS 5155-5180'
OC - 9-18-67
Comp - 9-25-67

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

SIGNED [Signature] TITLE AREA SUPERINTENDENT DATE 9-26-67

2-NMCCC-11
1-5050
1-5050
CONDITIONS OF APPROVAL, IF ANY: [Signature] DATE SEP 28 1967