

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIP
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-0321613

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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. 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 (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
14. PERMIT NO.
15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3248' R.D.B.

7. UNIT AGREEMENT NAME

SOUTH MATTHEW UNIT FED.

8. FARM OR LEASE NAME

9. WELL NO.

10

10. FIELD AND POOL, OR WILL CAT

FOULIER BLINERY

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

15-24-37 NMPM

12. COUNTY OR PARISH

LEA

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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 accordance w/ Form 9-331 submitted 2-1-67.
remedial work performed as follows:

Cleaned out and ran 4 1/2" OD 9.5# J-55 Casing to
PBD of 5820' and cemented w/ 185 sz. Incon neat.
Temp 3795: WOC. Perf 5350-52 w/ 4 Holes. Unable
to squeeze. Tested Casing w/ 1000 psi. Held OK.
Perforated Blinery 5690-92, 5664-72, 5614-18,
5598-5601, 5558-62, 5516-18, 5498-5501, 5470-72,
5456-60, 5424-34. Acidized w/ 2000 gal 15%. Fraced
w/ 40,000 gal gel time w/ 1 1/2" sand/gel. Evaluated.

PT- Flowed 143 Box 16 BLW 24 hours. 2 1/4" Choke, TPF 280, CP 980.
GOR 1925.

OC- 0-4-67
Comp 9-25-67

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

SIGNED

TITLE

AREA SUPERINTENDENT

DATE

9-26-67

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

DATE

SEP 28 1967

*See Instructions on Reverse Side J L GORDON
ACTING DISTRICT ENGINEER

4-USGS
1-NSD
1-SISP
1-RRV
1-ATL
1-CONDO
1-SID OF EX
1-TENNECO
1-STATELAND