

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. 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. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

2. Name of Operator

American Exploration Company

3. Address of Operator

2100 RepublicBank Center, Houston, Texas 77002

8. Well No.

95

9. Pool name or Wildcat

S. Hospah Field (Lr. Hospah Form

4. Well Location

Unit Letter I : 1450 Feet From The South Line and 400 Feet From The East Line

Section 1

Township 17N

Range 9W

NMPM

McKinley

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

6926'

11.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Add perforations to Upper Hospah Sd. ☒

12. 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.

March 7, 1989

Perforated Upper Hospah from 1490-1533'. Stimulated well w/165 gals. 15% NEFE additives. Swabbed well and placed back on production on pump with 24 hr. test results of 4 BO and 189 BW.

RECEIVED  
MAY 01 1989  
OIL CON. DIV  
DIST. 3

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

SIGNATURE

Marty B. McClanahan

TITLE

Sr. Production Analyst

DATE

4/27/89

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

Original Signed by FRANK T. CHAVEZ

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: