

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS

(Do not use this form for proposals to drill or to deepen or plug wells. Use "APPLICATION FOR PERMIT" for such purposes.)

WELLS

(to a different reservoir, etc.)

5. LEASE DESIGNATION AND SERIAL NO.

LC-032450 (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

SOUTH MATTHEW UNIT

8. FARM OR LEASE NAME

9. WELL NO.

5

10. FIELD AND POOL, OR WILDCAT

FOWLER ELLENBURGER

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

22-24-37 N.M.P.M.

12. COUNTY OR PARISH

LEA

13. STATE

N.M.

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

American Petroleum Corp.

3. ADDRESS OF OPERATOR

Box 68 Hobbs N.M.

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface

1980' FNL X 660' FEL SEC 22 (UNIT H, SE 1/4 NE 1/4)

14. PERMIT NO.

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

3247' DF

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*

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 an effort to increase productivity of well it is proposed to perforate interval 9736'-66' w/ 2 1/2" SPF and acidize with 2000 gallons.

TD 11,150'

PBD 10,230

7" CSA 10426' w/ Top Cmt @ 4835'

PERFS: 10,050'-10,115' & 10,250'-10,300'

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

SIGNED

TITLE

Carea Supt

DATE

12-23-64

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

5-USGS
2-STD OF TEX
1-TENNECO
1-ATLANTIC
1-STATE LAND

1-JWB
1-SUGP
1-RRV

*See Instructions on Reverse Side

