

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.

30-025-28614

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

K-3846

7. Lease Name or Unit Agreement Name

New Mexico "U" State

8. Well No.

2

9. Pool name or Wildcat

Baum Upper Penn

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

1331 Lamar, Suite 900 Houston, Texas 77010-3088

4. Well Location

Unit Letter B : 660 Feet From The North Line and 1980 Feet From The East Line

Section 4 Township 14S Range 33E NMPM Lea County

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

4237 GR

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: ☐

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.

American Exploration request a Long Term Shut-in status. The well was tested for casing integrity May 15, 1997. Intergrity test chart is attached.

This Approval of Temporary
Abandonment Expires 7/9/2002

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

SIGNATURE

Melinda Mayse

TITLE Regulatory Coordinator

DATE 7/11/97

TYPE OR PRINT NAME

Melinda Mayse

TELEPHONE NO. 713-756-6338

(This space for State Use)

ORIGINAL SIGNED BY CHRIS WILLIAMS

APPROVED BY

DISTRICT I SUPERVISOR

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

JKSG

