DEPARTME	ITED STATES NT OF THE INTERIOR LAND MANAGEMENT	FORM APPROVED Budget Bureau No. 1004-0135 Expires: September 30, 1990 5. Lease Designation and Serial No.
the not use this form for proposals to d	AND REPORTS ON WELLS rill or to deepen or reentry to a different reservoir. OR PERMIT—" for such proposals T IN TRIPLICATE	6. If Indian, Allottee or Tribe Name
SUBMI	7. If Unit or CA, Agreement Designation	
Name of Operator American Exploration Co. 3. Address and Telephone No. P. O. Box 1885 Eunice. N 4. Location of Well (Footage, Sec., T., R., M., or Survey E Umit C 990' FNL & 1980' FWL, Sec.	lescription)	8. Well Name and No. <u>Citco Federal #1</u> 9. API Well No. <u>30-025-25771</u> 10. Field and Pool, or Exploratory Area <u>Corbin Queen</u> 11. County or Parish, State <u>Lea, NM</u> RT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
 Notice of Intent Subsequent Report Final Abandonment Notice **Other - TA 	Abandonment Abandonment Recompletion Plugging Back Casing Repair Altering Casing Other	Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection
	(Note: Report results o Recompletion Report a	f multiple completion on Well Completion or nd Log form.)

13. 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.)*

*Subject well has been tested & met the requirements of your office. The casing was found to be in good condition.

*This is a request to temporarily abandon the referenced well for the time period designated by the Bureau of Land Management or until such time that the price of crude oil reaches an acceptable economic level.

*This is a oil well capable of producing, but in quantities of less than 10 BOPD. At present the cost of operations exceeds the revenue obtained by its current level of productivity.

ASPROVED BOD 12 MONTH PERIOD

ENDERC 5-1-92

hereby certify that the foregoing is true and correct signed	Title	Regional Superintendent	Date 5/15/91
This space for Federal or State office use)			
pproved by	Title		Date 3 91
onditions of approval, if any:			<i>Date</i>

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements of representations as to any matter within its jurisdiction.

FRN

RECEIVED JUN 1 0 1991 Cast Hoess Correct

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