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NEW MEXICO OIL CONSERVATION COMMISSION

JUN 17 8 29 AM '66

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease  
State ☐ Fee ☒  
5. 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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Principal Operator <i>Am American Petroleum Corp.</i>	8. Farm or Lease Name <i>B+ THORP RIA A</i>
3. Address of Operator <i>Box 68, Hobbs, New Mexico</i>	9. Well No. <i>26</i>
4. Location of Well UNIT LETTER <i>E</i> <i>1980</i> FEET FROM THE <i>NORTH</i> LINE AND <i>1980</i> FEET FROM THE <i>WEST</i> LINE, SECTION <i>10</i> TOWNSHIP <i>19-S</i> RANGE <i>38-E</i> NMPM.	10. Field and Pool, or Wildcat <i>HOBBS (GSA)</i>
15. Elevation (Show whether DF, RT, GR, etc.) <i>3606 DF</i>	12. County <i>LEA</i>

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	

17. 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.

*Cleaned out hole to a depth of 4201' and acidized open hole with 1000 gallons 15% in an effort to increase productivity.*

*Prior - Pump 28 BO x 0 BW 24 hours  
After - Pump 104 BO x 76 BW 48 hours.*

*TD-4201'  
OH- 4000-4201'  
6 3/8" CSA 4000'*

*OC-S-23-66  
COMP-G-1-66*

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

SIGNED *[Signature]* TITLE *Carea Supt* DATE *6-15-66*

*W2-NMOC-4  
1-1560*

APPROVED BY *1-5050*  
CONDITIONS OF APPROVAL, IF ANY:

TITLE DATE

