Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

CONDITIONS OF AFFROVAL, IF ANY:

Revised 1-1-89

P.O. Box 1980, Hobbs, NM 88240 P.O. Bo	TION DIVISION ox 2088 exico 87504-2088	WELL API NO.
P.O. Drawer DD, Artesia, NM 88210  DISTRICT III	0/3 <del>01-</del> 2008	5. Indicate Type of Lease STATE X FEE
1000 Rio Brazos Kd., Aztec, NM 87410		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.)		7. Lease Name or Unit Agreement Name Elk State
1. Type of Well: OIL GAS WELL OTHER		
2. Name of Operator American Exploration Company		8. Well No.
3. Address of Operator 2100 RepublicBank Center, Houston, Texa	s 77002	9. Pool name or Wildcat Teague Blinebry
4. Well Location  Unit Letter : 330 Feet From The SO	uth Line and 99	O Feet From The West Line
Section 16 Township 23S		NMPM Lea County
10. Elevation (Show v	vhether DF, RKB, RT, GR, etc.)	
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data		
NOTICE OF INTENTION TO:	SUE	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK  PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING	GOPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	CASING TEST AND CI	EMENT JOB [
OTHER:	OTHER:	
<ol> <li>Describe Proposed or Completed Operations (Clearly state all pertinent de work) SEE RULE 1103.</li> </ol>	tails, and give pertinent dates, inclu	ding estimated date of starting emy proposed
Tagged CIBP @ 5800'. Drilled down to 6,3 6107-09, 6088-94, 6041-50 and 5380-84. Hot oiled well downhole to remove paraffwell in. Put well back on production on and 30 MCF/D.	Pumped 2000 gals. 1 in.   Pumped 3000 (	lean and perforated 2 JSPF @ 5% NEFE acid + additives. gals. 15% NEFE acid and swabbed hr. pump rate of 11 BO, 81 BW
I hereby certify that the information above is true and complete to the best of my knowledge of the best of my knowledge of the best of my knowledge of the best of the best of my knowledge of the best of the best of my knowledge of the best of the best of my knowledge of the best of the best of the best of my knowledge of the best of the be	- /	tion Analyst pate 6/7/89
(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR		SEP 1 9 1989
APPROVED BY	TITLE	DATE