

(November 1983)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

(Other instructions on reverse side)
Expires August 31, 1985
LEASE DESIGNATION AND SERIAL NO.

LC 054667

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—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER Oil & Produced Water Spill		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR American Exploration Company		8. FARM OR LEASE NAME Gregory El Paso Federal	
3. ADDRESS OF OPERATOR 1331 Lamar, Ste. 900 Houston, Texas 77010		9. WELL NO. 4	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit K NWSE,SWSE,SESW 1980' FSL & 1980' FWL of Section		10. FIELD AND POOL, OR WILDCAT Crosby	
14. PERMIT NO. SWD - 240		11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Sec. 33, T25S, R37E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.)		12. COUNTY OR PARISH Lea	
		13. STATE NM	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <u>Spill</u> <input checked="" type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.) *

On 10/23/95 at approximately 4:00 pm CDT a spill of 25 BO and 720 BW was discovered. Cause of spill was due to pump failure, causing tanks to overflow. All but 20 BW was contained within the firewall. Pump was repaired. Vacuum truck was used, recovered 25 BO & 720 BW, on affected area, followed by non-enhanced bioremediation.

HOBBS INSPECTION OFFICE
ACCEPTED FOR RECORD
DATE 10-31-95
SIGNATURE UN 3

RECEIVED
OCT 30 4 46 PM '95
BUREAU OF LAND MGMT
HOBBS, NM

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

SIGNED

Melinda Mayse

TITLE

Environmental, Health
& Safety Technician

DATE

10/25/95

(This space for Federal State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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 or representations as to any matter within its jurisdiction.

