

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN 1 LOCATE*
(Other instructions on re-verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-053259 (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Madden A

9. WELL NO.

#2

10. FIELD AND POOL, OR WILDCAT

Grayburg-Jackson

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 28, T-17-S, R-30-E

12. COUNTY OR PARISH

Eddy

13. STATE

N. Mex.

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 ☐ GAS WELL ☐ OTHER ☒

Water Injection

2. NAME OF OPERATOR

General American Oil Company of Texas

3. ADDRESS OF OPERATOR

P. O. Box 416, Lugo Hills, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

2615' FWL and 1295' FWL of Section 28,
T. 17-S, R. 30-E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3644 GL

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☒

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

(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 July 5, 1965 we acidized this well with 300 gals of 20% acid. Maximum pressure 1800#, treating pressure 800#. Five minute SI pressure 0#. Ran tubing, prepared well for injection.

RECEIVED

JUL 15 1965

D. J.
ASTORIA

RECEIVED

JUL 18 1965

U. S. GEOLOGICAL SURVEY
WASHINGTON, D. C.

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

SIGNED

R. J. Heard

R. J. Heard

TITLE

District Superintendent

DATE

July 7, 1965

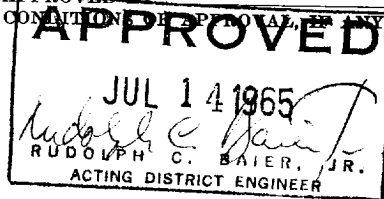
(This space for Federal or State office use)

APPROVED BY

COMMITTEE ON APPROVAL, IF ANY

TITLE

DATE



*See Instructions on Reverse Side