

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-0467934

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

G-J Premier Sand Unit Tr. AD

9. WELL NO.

#6

10. FIELD AND POOL, OR WILDCAT

Grayburg Jackson 52-06-52

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

Sec. 27, T-17-S, R-30-E

12. COUNTY OR PARISH

13. STATE

1. OIL ☒ GAS ☐ OTHER ☐
WELL WELL

RECEIVED

2. NAME OF OPERATOR

General American Oil Company of Texas

AUG 22 1978

3. ADDRESS OF OPERATOR

P. O. Box 128, Loco Hills, New Mexico 88255

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

D. C. C.
ARTEBIA, OFFICE

At surface

2310' FWL and 330' FWL of Section 27, T. 17-S, R. 30-E,
Eddy County, New Mexico.

14. PERMIT NO.

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

3650' GL

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other) Converting from Injection Well X

(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.)*

Decided to test well before re-working well in Sec. 27, T-17-S, R-30-E.

Well is pumping oil and water. Will continue to pump and conduct further testing.

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

SIGNED

TITLE Asst. Field Superintendent

DATE August 18, 1978

(This space for Federal or State office use)

APPROVED BY

TITLE ACTING DISTRICT ENGINEER

DATE AUG 21 1978

CONDITIONS OF APPROVAL, IF ANY: