

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

Copy to 45

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 type="checkbox"/> OTHER <input checked="" type="checkbox"/> Water Injection		5. LEASE DESIGNATION AND SERIAL NO. LC-067610-A	
2. NAME OF OPERATOR General American Oil Company of Texas		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 416, Loco Hills, New Mexico 88255		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 990' FSL and 2310' FKL of Section 14, TWP.16-S, Rge. 29-E		8. FARM OR LEASE NAME Rosworth	
14. PERMIT NO.		9. WELL NO. #3	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3704' DF		10. FIELD AND POOL, OR WILDCAT High Lonesome	
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 14, T-16-S, R-29-E	
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>		WATER SHUT-OFF <input type="checkbox"/>	
FRACTURE TREAT <input type="checkbox"/>		FRACTURE TREATMENT <input type="checkbox"/>	
SHOOT OR ACIDIZE <input type="checkbox"/>		SHOOTING OR ACIDIZING <input type="checkbox"/>	
REPAIR WELL <input type="checkbox"/>		(Other) Shut-in Status	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
PULL OR ALTER CASING <input type="checkbox"/>		REPAIRING WELL <input type="checkbox"/>	
MULTIPLE COMPLETE <input type="checkbox"/>		ALTERING CASING <input type="checkbox"/>	
ABANDON* <input type="checkbox"/>		ABANDONMENT* <input type="checkbox"/>	
CHANGE PLANS <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. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*			

This well is still part of an active waterflood unit and we request to hold this well for possible use either as an injection well or producing well prior to the economic limit of this unit.

RECEIVED

OCT 24 1975

O. C. C.
ARTESIA, OFFICE

RECEIVED

SEP 16 1975

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED Roy Crow

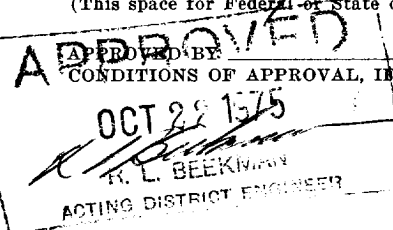
TITLE District Superintendent

DATE September 16, 1975

(This space for Federal or State office use)

TITLE

DATE



UNLESS FURTHER APPROVED, WELL MUST
BE PUT TO BENEFICIAL USE OR PLUGGED BY
APRIL 1, 1976

*See Instructions on Reverse Side