	- NN	OCC COPY	Copy to SF	
Form 9-33!	UNITED STATES	SUBMIT IN TRIPLICATE.	Form approved. Budget Bureau No. 42-R1424.	
(May 1963)	DEPARTMENT OF THE INTER	RIOR (Other instructions on re-	5. LEASE DESIGNATION AND MERIAL NO.	
	GEOLOGICAL SURVEY		LC-061638	
			6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
	NDRY NOTICES AND REPORTS s form for proposals to drill or to deepen or plup Use "APPLICATION FOR PERMIT—" for such			
1. OIL GAS WE'L WELL	OTHER Water Injection	RECEIVED	7. UNIT AGBEEMENT NAME	
2. NAME OF OPERATOR	V	0.07	8. FARM OR LEASE NAME	
General Ame	rican Oil Company of Texas	OCT 1 3 1977	Brewer	
3. ADDRESS OF OPERATOR			9. WELL NO.	
P. O. Box 4			5	
4. LOCATION OF WELL (Report location clearly and in accordance with an ARTERIANITERPICE See also space 17 below.) At surface			10. FIELD AND FOOL, OR WILDCAT High Lonesome	
	FNL and 1980' FEL Section	14, T-16S, R-29E	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
			Sec. 14, T-16S, R-29E	
14. PERMIT NO.	15. ELEVATIONS (Show whether	DF, RT, GR, etc.)	12. COUNTY OB PARISH 13. STATE	
	3729'	DF	Eddy New Mexico	
16.	Check Appropriate Box To Indicate	Nature of Notice, Report, or O	ther Data	
	NOTICE OF INTENTION TO:	SUBSEQU:	ENT REPORT OF:	
TEST WATER SHUT-	OFF PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL	
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CABING	
SHOUT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDON MENT*	
REPAIR WELL	CHANGE PLANS	(Other)	<u>Shut In Status</u> X	
(Other)		(NOTE: Report results Completion or Recomple	of multiple completion on Well etion Report and Log form.)	
17. DESCRIBE PROPOSED proposed work. nent to this work.	OR COMPLETED OPERATIONS (Clearly state all pertin If well is directionally drilled, give subsurface lo	pent details, and give pertinent dates, pocations and measured and true vertical	including estimated date of starting any depths for all markers and zones perti-	

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.

CONDITIONS OF APPROVAL, IF ANY:	UNLESS FURTHER AN BE PUT TO BENEFICAN e Instructions on Reverse Sidian Octomer a	PPROVED,	WELL MUST
(This space for Federal or State office use) APPROVED BY <u>Jack</u>	TITLE ACTING DISTRICT ENGINEER	DATE	OCT 1 2 1977
18. I hereby certify that the foregoing is true and correct SIGNED Condell Naubing	TITLE Assist Field Superintendent	date <u>S</u> e	eptember 29, 19

OCT 1 - 1978

REVEIVED SEP 2 9 1977

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U. S. GEOLOGIBAL SURVEY ARTESIA, NEW MEXICO

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