

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPL  
(Other instructions on  
reverse side)

Form approved  
Budget Bureau No. 42-R1424

Copy to [unclear]

5. LEASE DESIGNATION AND SERIAL NO.

LC-061638

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Brewer

9. WELL NO.

#27

10. FIELD AND POOL, OR WILDCAT

High Lonesome

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

Sec. 14, T-16-S R-29-E

12. COUNTY OR PARISH 13. STATE

Eddy

N.M.

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 Loco Hills, New Mexico 88255**

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

**990' FSL and 660' FWL of Section 14,  
Twp. 16-S, Rge. 29-E**

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
**3699' DF**

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)

**Shut-in Status**

(Other)

(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.)\*

**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 flood.**

RECEIVED

OCT 14 1975

RECEIVED

U.S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO  
SEP 16 1975

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)

APPROVED BY

*A. Buchanan*

TITLE APPROVED. WELL MUST

DATE

CONDITIONS OF APPROVAL, IF ANY: UNLESS FOR

REPLETION OF OPERATIONAL USE IT MUST BE APPROVED BY  
OCT 1 - 1976

\*See Instructions on Reverse Side