

N. M. O. C. C. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

NM-12764 *Coyote* 51-
Form approved.
Budget Bureau No 42-B1424

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 ☒ GAS ☐ OTHER WELL ☒ WELL ☐ OTHER 2. NAME OF OPERATOR General American Oil Company of Texas 3. ADDRESS OF OPERATOR P. O. Box 416, Loco Hollis, New Mexico 88255 4. LOCATION OF WELL (Report location, county and in accordance with the State Oil and Gas Commission. Also specify the location of the well on the surface.) 1650- FSI and 330' FEE of Section 35, Twp. 16-S, Rge. 29-E 11. PERMIT NO. 3671' DF	5. LEASE DESIGNATION AND SERIAL NO. LE-029195 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 7. UNIT AGREEMENT NAME 8. PAID OR LEASE NAME Nunlee 1.1 9. WELL NO. #6 10. FIELD AND POOL, OR WILDCAT Square Lake Pool 11. SEC., T., R., M. OR BLM. AND SURVEY OR AREA Sec. 35, T-16-S, R-29-E 12. COUNTY OR PARISH Eddy 13. STATE N.M.
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16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE INTENDING TO SEAL OR SHUT OFF ☐ PLUGGING Casing ☐ FRACURE DEEP ☐ DEEPER Casing ☐ REPAIR OR REPAIR ☐ Casing ☐ Other ☐	SUBSEQUENT REPORT OF: WATER SHUT OFF ☐ REPAIRING WELL ☐ FRACURE DEEP ☐ ALTERING CASING ☐ SEALING OF CASING ☐ ABANDONMENT ☐ Other ☒ Shut-in Status
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17. (Attach this report to the permit application. It should include state oil and gas commission details, and give permit dates, including estimated date of starting any proposed work. If well is intentionally filled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

We request that this well be held for a possible recompletion up the hole.

Well was shut in January, 1971 for economical or mechanical reasons.

After feasibility studies are completed work should be commenced within the next two years.

RECEIVED
OCT 29 1974
U.S. GEOLOGICAL SURVEY
ALBUQUERQUE, N.M.

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

SIGNED *Ray C. ...* TITLE District Superintendent DATE Oct. 23, 1974

(This space for Federal or State office use)

APPROVED BY *[Signature]* DATE OCT 31 1975
CONDITIONS OF APPROVAL, IF ANY:
UNLESS FURTHER APPROVED, WELL MUST BE PUT TO BENEFICIAL USE OR PLUGGED BY APRIL OCTOBER 1975
*See Instructions on Reverse Side

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