

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

NMOCC COPY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Copy to SF
Form approved.
Budget Bureau No. 42-R1424.

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-028784-c	
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 1980' FNL and 660' FWL Section 25, T-17S, R-29E		8. FARM OR LEASE NAME Keely C	
14. PERMIT NO.		9. WELL NO. 10	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3596' DF		10. FIELD AND POOL, OR WILDCAT Grayburg-Jackson	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 25, T-17S, R-29E	
		12. COUNTY OR PARISH Eddy	
		13. STATE New Mexico	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	Shut-In Status <input checked="" type="checkbox"/>

(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.)*

We request this shut-in water injection well be held for possible use as an injection well in a Metex Sand Flood under study at this time.
Well was shut in October, 1973 for economical or mechanical reasons.

RECEIVED
SEP 29 1977
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED Rendell Hawkins TITLE Assist. Field Superintendent DATE September 29, 1977

(This space for Federal or State office use)

APPROVED BY Joe J. Lora TITLE ACTING DISTRICT ENGINEER DATE OCT 12 1977
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

UNLESS FURTHER APPROVED, WELLS MUST
BE PUT TO BENEFICIAL USE OR PLUGGED BY
APRIL 1, 1978
OCT 1 - 1977