

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

Form approved.
Budget Bureau No. 42-B1424.
5. LEASE DESIGNATION AND SERIAL NO.

LC-028784-c

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 ☒ GAS WELL ☐ OTHER ☐
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:
**1980' FNL and 660' FEL of Section 25,
Twp. 17-S, Rge. 29-E**
14. PERMIT NO. _____ 15. ELEVATIONS (Show whether of RT, GR, etc.) _____

6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____
7. UNIT AGREEMENT NAME _____
8. FARM OR LEASE NAME
Keely C
9. WELL NO.
#13
10. FIELD AND POOL, OR WILDCAT
Grayburg-Jackson
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 25, T-17-S, R-29-E
12. COUNTY OR PARISH
Eddy 13. STATE
N.M.

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

NATURE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

REPAIR OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACURE TREAT

COMPLETE COMPLETION

FRACURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

RELEASE A WELL

RECOVER PLANS

OTHER

Shut-in Status

☒

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. (If other proposed or actual operations, it may state 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 well be held for recompletion up the hole.

Well was shut in February, 1973 for economical or mechanical reasons.

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

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

SIGNED *[Signature]*
(This space for Federal or State office use)

TITLE **District Superintendent**

DATE **Oct. 23, 1974**

APPROVED BY *[Signature]*
CONDITIONS OF APPROVAL, IF ANY:

TITLE **WELL MUST**

DATE

UNLESS FURTHER APPROVED
BE PUT TO BENEFICIAL USE OR PLUGGED BY
APRIL 1, 1975
***See instructions on Reverse Side**

RECEIVED
OCT 23 1974
APPROVED BY
DISTRICT SUPERINTENDENT
EDDY, NEW MEXICO

SECRET

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NOV 20 1940
U.S. DEPARTMENT OF THE ARMY
WASHINGTON, D.C.

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