

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

PERMIT IN TRIPPLICATE
(Other instructions on
reverse side)

5. LEASE DESIGNATION AND SERIAL NO.

LC 028775 (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS **RECEIVED**

(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 Water Injection **AUG 17 1977**

2. NAME OF OPERATOR
Shenandoah Oil Corporation **O. C. C. ARTESIA, OFFICE**

3. ADDRESS OF OPERATOR
1500 Commerce Building - Fort Worth, Texas - 76102

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
1980' FNL and 1980' FEL Section 27 - T17S - R29E

7. UNIT AGREEMENT NAME
Robinson Jackson Unit

8. FARM OR LEASE NAME
Tract 2

9. WELL NO.
15

10. FIELD AND POOL, OR WILDCAT
Grayburg Jackson

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

Sec. 27 - T17S - R29E

14. PERMIT NO.
15. ELEVATIONS (Show whether LF, RT, GR, etc.)
3,548 Gr

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:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☒
(Other) ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) ☐
REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

(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 perti-
nent to this work.) *

- (1) Flow well down to emergency pit
- (2) Pull tubing, packers and flow regulators. Repair same.
- (3) Run tubing, packers and flow regulators. Put well back on injection.

RECEIVED

AUG 8 1977

**U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO**

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

SIGNED C. W. Downey, Jr. TITLE Operations Superintendent DATE August 4, 1977

(This space for Federal or State office use)

APPROVED BY ADDON TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side