

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

PERMIT IN TRIPLICA
Other instructions on
reverse side)

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

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 16 1977**

2. NAME OF OPERATOR **Shenandoah Oil Corporation**

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 34 - T17S - R29E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3,516 Gr

7. UNIT AGREEMENT NAME
Robinson-Jackson Unit

8. FARM OR LEASE NAME
Tract 1

9. WELL NO.
4

10. FIELD AND POOL, OR WILDCAT
Grayburg-Jackson

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 34 - 17S - 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	☐	PULL OR ALTER CASING	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐
REPAIR WELL	☒	CHANGE PLANS	☐
(Other)			

SUBSEQUENT REPORT OF:

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

- (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
CONDITIONS OF APPROVAL, IF ANY:

TITLE DATE

AUG 12 1977

**H. L. [Signature]
ACTING DISTRICT ENGINEER**

*See Instructions on Reverse Side