

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate
(Other instructions on reverse side)

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 ☐ GAS WELL ☐ OTHER Water Injection

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 2310' FNL and 2615' FEL of Section 19, T. 17-S, R. 30-E

14. PERMIT NO. _____

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3628' DF

5. LEASE DESIGNATION AND SERIAL NO.
LC-028793-a

6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____

7. UNIT AGREEMENT NAME _____

8. FARM OR LEASE NAME
Burch A

9. WELL NO.
#24

10. FIELD AND POOL, OR WILDCAT
Grayburg Jackson

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 19, T-17-S, R-30-E

12. COUNTY OR PARISH
Eddy

13. STATE
New Mexico

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Shut In Status</u> <input checked="" type="checkbox"/>	
(Other) <input 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 well be held for recompletion in
Loco Hills or Seven Rivers.

Well was shut in February, 1961 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 Randell Hawkins TITLE Asst. Field Superintendent DATE September 29, 1977

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE ACTING DISTRICT ENGINEER DATE OCT 12 1977

CONDITIONS OF APPROVAL, IF ANY: _____

*See Instructions on Reverse Side

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