

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYPERMIT IN TRI. STATE
(Other countries have on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

LC-029020 (e)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Parke E

9. WELL NO.

#2

10. FIELD AND POOL, OR WILDCAT

Jackson Abo

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

Sec. 22, T-17-S, R-30-E

12. COUNTY OR PARISH 13. STATE

Eddy

N.M.

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 ☐ GAS ☐
WELL ☒ 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 instructions 17 below.)
At surface2310' FNL and 330' FEL, Section 22,
Twp. 17-S Rge. 30-E

14. SERVICE NO.

15. ELEVATIONS (Show whether DE, RL, OR, etc.)

3680' DF

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 COMPLETION

STIMULANT OR ACIDIZE

ABANDONMENT

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

STIMULANT OR ACIDIZING

ABANDONMENT*

COMPLETION

Shut-in Status

X

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)17. DESCRIBE PROPOSED OR COMPLETED WORK, including 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.)*

We request this well be held for possible recompletion in Queen or Premier.

Well was shut in November, 1968 for economical or mechanical reasons.

After feasibility studies are completed work should be commenced within the
next two years.RECEIVED
OCT 29 1974U.S. GEOLOGICAL SURVEY
ALBUQUERQUE, N.M.

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

SIGNED

Ray Lion

TITLE District Superintendent

DATE Oct. 23, 1974

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY

UNLESS FURTHER APPROVED, WELL MUST
BE PUT TO BENEFICIAL
TITLE USE OR PLUGGED BY
APRIL OCTOBER 1975

DATE

*See Instructions on Reverse Side

1. *Journal of the American Medical Association*, 1997; 277: 1039-1043.

13