

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 028992 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Grayburg Jackson Unit

8. FARM OR LEASE NAME

Tract 6A

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Grayburg Jackson/0-4 SA

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

SURVEY OR AREA
Section 26-T17S-R30E,
NMPM

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

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 Well

2. NAME OF OPERATOR
General Operating Company ✓

3. ADDRESS OF OPERATOR
Suite 1007 Ridglea Bank Building, Fort Worth, Texas 76116

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
990' FSL and 330' FSL
Section 26-T17S-R30E, NMPM

14. PERMIT NO.
- - -

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3591' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other) Equipping w/ Tubing & Packer	<input checked="" 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.)*

As per Notice of Intention approved by the Artesia office of the USGS on October 3, 1980, operations to equip General Operating Company's WIW #6A-1 Grayburg Jackson Unit with plastic coated tubing on packer was commenced on October 14, 1980.

The 4½" OD casing was cleaned out to PBTD 3281' and 2-3/8" OD plastic coated tubing w/ packer was run to 3188' and set. After pressure testing casing annulus to 450 psig, packer was released to permit circulation of packer fluid to spot in tubing-casing annulus. Packer was then reset and well hooked up for water injection via tubing. Water injection was commenced @ 12 noon October 16, 1980.

Pressure testing and placement of packer fluid witnessed by Mr. B. W. Weaver w/ New Mexico Energy and Minerals Department, Oil Conservation Division, Artesia District office.

RECEIVED

OCT 24 1980

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED C.W. StumbhoffTITLE Vice-PresidentDATE 10/20/80

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side

OCT 20 1980
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ARTESIA, NEW MEXICO