

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TR
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onForm approved.
Budget Bureau No. 42-R1424.

C/SF

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Water Injection Well		5. LEASE DESIGNATION AND SERIAL NO. LC 028992 (b)
2. NAME OF OPERATOR General Operating Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME --
3. ADDRESS OF OPERATOR Suite 1007 Ridglea Bank Bldg, Fort Worth, Texas 76116		7. UNIT AGREEMENT NAME Grayburg Jackson Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 810' FSL and 660' FEL Section 26-T17S-R30E, NMPM		8. FARM OR LEASE NAME Tract 13
14. PERMIT NO. --		9. WELL NO. 4
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3535' GR		10. FIELD AND POOL, OR WILDCAT Grayburg Jackson Q-SA
12. COUNTY OR PARISH Eddy		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 26-17S-30E, NMPM
13. STATE New Mexico		

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O. C. D.

ARTESIA, OFFICE

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"/>	

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 #13-4 Grayburg Jackson Unit with plastic coated tubing on packer was commenced on December 9, 1980.

The 4½" OD casing was cleaned out to PBTD 3267' and 2 3/8" OD plastic coated tubing was run and set on packer at 3181'. After pressure testing casing annulus to 800 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 @ 2:00 p.m. 12-10-80.

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

REMOVED
NOV 25 1981OIL & GAS
U.S. GEOLOGICAL SURVEY
POSWELL, NEW MEXICO

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

SIGNED C. W. Samboff TITLE Vice-President DATE 11-18-81

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____
ACCEPTED FOR RECORD

*See Instructions on Reverse Side

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