

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

5. Lease Designation and Serial No.

8910085020

6. If Indian, Allottee or Tribe Name

LC-059376

SUBMIT IN TRIPLICATE

RECEIVED

JAN 31 1991

O. C. D.
ARTESIA, OFFICE

SJS

7. If Unit or CA, Agreement Designation
Grayburg-Jackson Unit

8. Well Name and No.

Grayburg Jackson Tr-11, #2

9. API Well No.

NA

10. Field and Pool, or Exploratory Area

Grayburg Jackson

11. County or Parish, State

Eddy County, New Mexico

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

General Operating Company

3. Address and Telephone No.

P.O. Box 877, Wichita Falls, TX 76307-0877; (817)767-4801

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

NENE, Sec. 27, T.17S., R.30E.
Tract 11, No. 2

660' FN4EL

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other test casing
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

Will perform casing pressure test. If test passes well will be activated or temporarily abandoned. If test fails, well will be permanently plugged.

RECEIVED
JAN 28 11 07 AM '91
BUREAU OF LAND MANAGEMENT
U.S. DEPARTMENT OF THE INTERIOR

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

Signed

Title

Superintendent

Date

1-24-91

(This space for Federal or State office use)

Approved by

Title

Date

1/30/91

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See instruction on Reverse Side