

UNITED STATES  
DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

NM 018101S-60, 88210  
Other instructions on reverse side  
Drawer DD

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

91-008502LC-078992A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☐

2. NAME OF OPERATOR

General Operating Company

3. ADDRESS OF OPERATOR

c/o 216 American Home Bldg., Artesia, NM 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1980'FSL 660'FEL of Section 27-T17S-R30E

14. PERMIT NO.

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

7. UNIT AGREEMENT NAME

Grayburg-Jackson Unit

8. FARM OR LEASE NAME

Flood

9. WELL NO.

7B-1

10. FIELD AND POOL, OR WILDCAT

Gray-Jack-SR-Q-Gray-SA

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

Sec. 27-T17S-R30E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.)\*

Propose to run tubing and pump then put back on production.

RECEIVED  
SEP 15 10 18 AM '83

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

SIGNED

*Peter W. Chester*

TITLE

Partner

DATE

9/14/83

(This space for Federal or State agency use)

(Orig. Sgd.) PETER W. CHESTER

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

SEP 29 1983

\*See Instructions on Reverse Side