Form 9-33i (May 1963)

## UNITED STATES SUBMIT IN TRIPLICATE Other instructions on reverse side)

GEOLOGICAL SURVEY

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

LC-028936-e

CHNIDDA	NOTICES	V VID	REPORTS	ON	WELLS
2011/11/11/K A	INCHICES.	AND	KEPUKIS	UNIV	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.) UNIT AGREEMENT NAME ī. RECEIV OIL GAS WELL WELL OTHER Water Injection 2. NAME OF OCCRATOR 8. FARM OR LEASE NAME JUN - 1 1978 G-J Premier Sd. Ut. Tr. MI Canada . Amarican Oil Company of Texas 3. ADDRESS OF OPERATOR 9. WELL NO. P.G. - 7 728 Loco H111s, N. M. 88255 0<u>. C.</u> C, 4. LOCATION OF WELL (Report location clearly and in accordance with any State requiremental Office See also space 17 below.)
At surface 10. FIELD AND POOL, OR WILDCAT Grayburg-Jackson 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 550' FSL and 1650' FEL Sec. 28, T-17S, R-30E Sec. 28, T-17S, R-30E

14. PERMIT NO.

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

12. COUNTY OR PARISH 13. STATE

S623' GL

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

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

NOTICE OF INTENTION TO:			SUBSE	SUBSEQUENT REPORT OF:			
<del></del>				<del></del>			
TEST WATER SHUT-OFF	PULL OR A	ALTER CASING	WATER SHUT-OFF	REPAIRING WELL			
FRACTURE TREAT	MULTIPLE	COMPLETE	FRACTURE TREATMENT	ALTERING CASING			
SHOOT OR ACIDIZE	ABANDON*	' <u>                                    </u>	SHOOTING OR ACIDIZING	ABANDON MENT*			
REPAIR WELL	CHANGE P	LANS	(Other)				
(Other) Applicati	ion for A Fen	nced Pit X	(Nore: Report result Completion or Recom	ts of multiple completion on Well pletion Report and Log form.)			
SHOOT OR ACIDIZE REPAIR WELL	ABANDON*	LANS	SHOOTING OR ACIDIZING (Other)				

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.)\*

Injection well has developed a packer leak.

Request permission to dig and fence a pit to backflow well.

After back flowing well repairs will be made and well will be returned to injection.

Pull Tubing Repair Leak Pat ON INJections

BUWGAVE BUWGAVE SUNEY

MAY 25 1978

[8, I ]	GNED / Cardell Hawkins	TITLE [	Assistant Field Superintend	ient <sub>te -</sub>	May 23, 1978
	PROVIDER OF FEDERAL OF State office (use)	TITLE _	ACTING DISTRICT ENGINEER	DATE _	MAY_3_1_1978