			ŐMii	රීරී ර	COPY,	. C	cpy.	foSF	
Form 9-331 (May 1963) DEPA		UN IED STATE MENT OF THE GEOLOGICAL SUP	INTERIOR	(() ther	T IN TRIFCATI instructions on i ide)	ــــــــــــــــــــــــــــــــــــــ	E DESIGNATION A	No. 42-R1424.	
(De not	SUNDRY NO	TICES AND REPORTION FOR PERMIT—"	ORTS ON	o a diffe	LS rent reservoir. VED	6. IF IN	DIAN, ALLOTTEE		
OIL X	GAS OTHER		- ∕ · · · · · · · · · · · · · · · · · ·	- /-	1077		AGREEMENT NAM		
2. NAME OF OPERATOR UUI 4 19//									
General American Oil Company of Texas 3. ADDRESS OF OPERATOR C. C. C.							Beeson F 9. WELL NO.		
P. O. Box 416, Loco Hills, New Mexico 88283ESIA, OFFICE 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 990' FSL and 1571' FWL of Section 31, T. 17-S, R. 30-E						Loco 11. BBC	#12 10. FIELD AND POOL, OR WILDCAT LOCO Hills 11. SEC., T., R., M., OE BLK. AND SURVEY OR AREA		
							31, T-17-		
14. PERMIT NO.		15. ELEVATIONS (Show	3566' DF	ir, etc.)			ldy	New Mexico	
16.	Check A	Appropriate Box To I	ndicate Natur	e of N	lotice, Report, or	Other Do	ata .		
	NOTICE OF INTENTION TO:					EQUENT REPO	QUENT REPORT OF:		
TEST WATE FRACTURE SHOOT OR REPAIR WE (Other)	ACIDIZE	PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS		FRACT 8H00 (Other	R SHUT-OFF TURE TREATMENT TING OR ACIDIZING er) Shu (Note: Report rest Completion or Reco	it In States	ple completion of	SING X	

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.)

Over the last two years three wells in this area have been reactivated from shut in to producing wells.

Further testing may allow the return of this well to active status. Request that it be held for further testing.

RECEIVED

		SEP 2 9 1977		
		B. S. GEOLOGIGAL SURVEY ARTESIA, NEW MEXICO		
18. I hereby certify that the foregoing is true and correct SIGNED Andell Haubens	TITLE Asst. Field Superinte	endent DATE September 29, 197		
(This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE ACTING DISTRICT ENGIS	NEER DATE OCT 3 - 1977		
LESS FURTHER APPROVED, WELL MUST PUT TO BENEFICAL USE OR PLUGGED BY *Se	e Instructions on Reverse Side	· · · · · · · · · · · · · · · · · · ·		