

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Copy to SF

Form approved.
Budget Bureau No. 42-R1424

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		5. LEASE DESIGNATION AND SERIAL NO. NM-0467934	
2. NAME OF OPERATOR General American Oil Company of Texas		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 416, Loco Hills, New Mexico 88255		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 330' FNL and 640' FEL of Section 34, T. 17-S, R. 30-E		8. FARM OR LEASE NAME G-J Premier Sand Unit Tr. #1	
14. PERMIT NO.		9. WELL NO. #9	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3554' GR		10. FIELD AND POOL, OR WILDCAT Grayburg Jackson	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 34, T-17-S, R-30-E	
		12. COUNTY OR PARISH Eddy	
		13. STATE New Mexico	

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) <input checked="" type="checkbox"/> Shut In Status	

(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.)*

We propose to set 5 1/2" cast iron bridge plug above Premier Sand, run acoustic log and re-cement across and above Seven Rivers zones. Drill out cement, perforate and sand frac Seven Rivers. This work will probably be done within the next three months.

RECEIVED
SEP 29 1977
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED Rendell Hawkins TITLE Asst. Field Superintendent DATE September 29, 1977

(This space for Federal or State office use)

APPROVED BY Lee D. Lamm TITLE ACTING DISTRICT ENGINEER DATE OCT 3 - 1977
CONDITIONS OF APPROVAL, IF ANY:UNLESS FURTHER APPROVED, WELL MUST
BE PUT TO BENEFICIAL USE OR PLUGGED BY
APRIL OCTOBER OCT 1 - 1978

Instructions on Reverse Side