

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions on
reverse side)Form approved
Budget Bureau No 42 R1424

5. LEASE DESIGNATION AND SERIAL NO.

LC-028793-b

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

RECEIVED

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. AGREEMENT NAME	
2. NAME OF OPERATOR General American Oil Company of Texas /		8. FARM OR LEASE NAME Burch "B" O. C. D.	
3. ADDRESS OF OPERATOR P. O. Box 128, Loco Hills, New Mexico 88255		9. WELL NO. 34	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2310' FSL & 330' FWL		10. FIELD AND POOL, OR WILDCAT Grayburg-Jackson	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 23, T-17S, R-29E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3605' KB		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 checked="" type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

(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.)*

On November 10, 1981, the well was perforated and on November 11, 12, & 13, 1981, the well was treated as follows:

3085'-3092'	8 Holes}	30,000 gallons gelled water containing 30,000#
3048'-3062'	8 Holes}	20/40 mesh bulk sand
2969'-2977'	9 Holes}	20,000 gallons gelled water containing 20,000#
2948'-2953'	6 Holes}	20/40 mesh bulk sand
2838'-2842'	3 Holes}	
2810'-2818'	5 Holes}	5000 gallons 15% N.E. acid
2802'-2803'	2 Holes}	
2797'	1 Hole }	
2762'-2765'	4 Holes}	
2746'-2748'	3 Holes}	3000 gallons 15% N.E. acid
2717'-2718'	2 Holes}	

RECEIVED
DEC 04 1981OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWell, NEW MEXICO

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

SIGNED M. S. LansingTITLE EngineerDATE 12/03/81

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

ACCEPTED FOR RECORD

DATE _____

DEC 15 1981

U.S. GEOLOGICAL SURVEY
ROSWell, NEW MEXICO

*See Instructions on Reverse Side