

Form 9-331
(May 1963)UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT
(Other in
verse side)

LICATE

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

16-061638 0556811

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR General American Oil Company of Texas		8. FARM OR LEASE NAME Brewer
3. ADDRESS OF OPERATOR P. O. Box 416, Loco Hills, New Mexico		9. WELL NO. 422
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL and 1980 FKL of Section 12, Twp. 16-S, Rge. 29-E.		10. FIELD AND POOL, OR WILDCAT Undesignated
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 16S Sec. 12 T-17-S, R-29-E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3739'		12. COUNTY OR PARISH Eddy
		13. STATE N.M.

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 checked="" type="checkbox"/>
(Other) <input type="checkbox"/>	Change 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.)*

This well was changed from a shut in gas well to a producing gas well in July 1965 for fuel to operate the East High Lonesome Waterflood. There are no gas sales from this well.

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

SIGNED Roy Crow **Roy Crow** TITLE District Engineer DATE Sept. 19, 1967

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

*See Instructions on Reverse Side

RECEIVED
SEP 21 1967
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

APPROVED
SEP 21 1967

R. L. L...
ACTING DISTRICT ENGINEER