

Form 9-331

Draper DD
Artesia, NM 88210Form Approved.
Budget Bureau No. 42-R1424

RECEIVED BY

UNITED STATES

MAR 29 1985

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYO.C.D.
ARTESIA OFFICE

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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☐ other Dual water injection

2. NAME OF OPERATOR

Getty Oil Company ✓

3. ADDRESS OF OPERATOR

P.O. Box 728, Hobbs, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: Unit Ltr F, 1980 FNL & 1980 FWLAT TOP PROD. INTERVAL:AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐CHANGE ZONES ☐ABANDON* ☐(other) Cement squeeze bradenhead waterflow.

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.)*

1. Rig up and pull tbq.

2. Set 5 1/2" retrievable bridge plug ± 2100'. Test RBP to 1000 psi and dump 15' of sand on RBP.

3. Perforate and squeeze holes 5' above top of cement.

4. Run dye fluid caliper.

5. Set cement retainer 75-100' above squeeze perfs.

6. Pump sufficient cement to surface.

7. Drill out retainer and cement.

8. Test squeeze perfs to 1000' psi.

9. Re-run injection tbq. and pkr. circ. pkr. fluid and return to injection.

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

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

SIGNED

W.B. LohTITLE Dist. Opr. Mgr.DATE March 19, 1985

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

**Subject to
Like Approval
by State**

*See Instructions on Reverse Side

5. LEASE
LC-029419 (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Skelly Unit

9. WELL NO.

44

10. FIELD OR WILDCAT NAME

Fren 7-Rivers & Grayburg Jackson

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 22, T-17S, R-31E

12. COUNTY OR PARISH

13. STATE

EddyNM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

3846' DF

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

