

95F

NM OIL CONS. COMMISSION
Drawer DD
Artesia, NM 88210

Form Approved.
Budget Bureau No. 42-R1424

RECEIVED BY
MAR 19 1985
O.C.D.
ARTESIA

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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. N, 650 FSL & 2087' FWL
AT 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	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>

(other) Repaired csg. leaks

5. LEASE
LC-029420 (A)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Skelly Unit

9. WELL NO. 30

10. FIELD OR WILDCAT NAME
Fren 7-Rivers & Grayburg Jackson

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 15, T-17S, R-31E

12. COUNTY OR PARISH 13. STATE
Eddy NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3870' DF

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

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. Rigged up and pulled tbg. and pkr.
2. Tested for leaks w/pkr.
3. Set BP at 2184' and pkr at 2481', cemented csg. leaks from 1553-1587' w/100 sx. CL "H" neat. WOC. DOC.
4. Test for 30 minutes to 600#, 6:30-7:00 A.M., 1/23/85. Tested OK.
5. Ran 2 1/16" Inj. tbg. and set pkr. at 3110'. Loaded annulus w/inhibited water.
6. Return to injection 1/11/85.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED W.B. Loh TITLE District Opr. Mgr. DATE March 8, 1985

(This space for Federal or State office use)

APPROVED BY ACCEPTED FOR RECORD TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY

Good
MAR 18 1985

FILED
MAR 18 1985
BY _____