

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 ☐ gas ☒ other ☐
2. NAME OF OPERATOR
Getty Oil Company
3. ADDRESS OF OPERATOR
P.O. Box 3360, Casper, WY 82602-3360
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 890' FNL & 990' FWL of Sec. 34
AT TOP PROD. INTERVAL: same (NW/NW)
AT TOTAL DEPTH: same
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

SUBSEQUENT REPORT OF:

- ☐
☐
☐
☐
☐
☐
☒
☐

(other) Notification of first gas sales.

5. LEASE
Contract #34
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla Apache
7. UNIT AGREEMENT NAME
-
8. FARM OR LEASE NAME
Jicarilla "C"
9. WELL NO.
#16
10. FIELD OR WILDCAT NAME
Otero Chacra
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 34-T25N-R5W
12. COUNTY OR PARISH
Rio Arriba
13. STATE
New Mexico
14. API NO.
-
15. ELEVATIONS (SHOW DF, KDB, AND WD)
6715' GR

(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.)*

This well was recompleted from the Gallup to the Chacra formation in December, 1982. It was SI on 12-27-82 waiting on a gas pipeline connection. On 4-6-82 @ 11:40 AM first gas delivery was made to El Paso Natural Gas Company. After two hours flowing: FTP 235 psi, CP 450 psi, 40 MCFGPD. OCS Federal prefix & #: 09-000034
Production is gas.

*Please Note that verbal notification was given to Mr. Steve Mason with the BLM in Farmington, New Mexico on 4-12-83.

Subsurface Safety Valve: Manu. and Type _____

Set @ _____ DIV. Ft.

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

SIGNED DeW TITLE Superintendent DATE 4-12-83

ACCEPTED FOR RECORD (This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL IF ANY:

APR 19 1983

NMOCC

*See Instructions on Reverse Side