

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
2. NAME OF OPERATOR
Getty Oil Company
3. ADDRESS OF OPERATOR
P.O. Box 3360, Casper, WY 82602
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 800' FNL & 1820' FWL
AT TOP PROD. INTERVAL: Same
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) Subsequent report of cement top behind 7" casing.

5. LEASE
SF 079601
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Lydia Rentz
9. WELL NO.
#7
10. FIELD OR WILDCAT NAME
Blanco MesaVerde/Ojito Gallup Dakota
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
C Section 20-T25N-R3W
12. COUNTY OR PARISH
Rio Arriba
13. STATE
New Mexico
14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
5222' G.L.

(NOTE: Report results of multiple completion or zone change on Form 9-331-C)



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 Sundry Notice is being submitted in regards to our Sundry Notice dated 9/10/81 (reporting 7" casing setting). The estimated cement top behind the 7" intermediate casing is at 500'. A cement bond log has not yet been run on this well. It is now waiting on a completion unit.

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

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

SIGNED DeW. Bauer TITLE Area Superintendent DATE 10/9/81

(This space for Federal or State office use)

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

OCT 15 1981

NMOCC

*See Instructions on Reverse Side

BY Smh

