

5-USGS-HOBBS
1-R. J. STARRAK-TU
1-A. B. CARY-MIDLAND

1-FILE
1-ELB, ENGR.
1-BH, FIELD CLK

COPY TO O. C. C.

Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

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 ☐
well well
2. NAME OF OPERATOR
Getty Oil Company
3. ADDRESS OF OPERATOR
P. O. Box 730, Hobbs, NM 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: Unit 1tr. C, 1980' FWL & 990' FNL
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 ☐ ☒
FRACTURE TREAT ☐ ☐
SHOOT OR ACIDIZE ☐ ☐
REPAIR WELL ☐ ☐
PULL OR ALTER CASING ☐ ☐
MULTIPLE COMPLETE ☐ ☐
CHANGE ZONES ☐ ☐
ABANDON* ☐ ☐
(other) ☐ ☐

5. LEASE
NM-18848
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
SDE 18 Federal
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
Undesignated
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 18, T-23S, R-32 E
12. COUNTY OR PARISH
Lea
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3555' 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.)*

11-7-79 Moved in Hondo Drilling Co. and spudded 15" hole at 2:00 p.m.

11-9-79 Drilled 15" hole to 967'. Ran 25 jts. 11 3/4" 45# R3 ST&C H-40 & set at 966'. Western Co. cemented with 600 sxs Lite with 1/4# flocele, 2% CaCl, 10# gilsonite/sx and tailed in with 300 sxs Class "C" cement with 2% CaCl. Plug down at 5:30 p.m. Circulated 250 sxs cement. WOC.

11-10-79 WOC 18 hrs. Cut off 11 3/4" csg. Installed wellhead and BOP. Tested to 1000# for 30 min. OK.

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

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

SIGNED Dale R. Crockett TITLE Area Supt. DATE 11-12-79
Dale R. Crockett

(This space for Federal or State office use)

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

