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Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-95

NEW MEXICO OIL CONSERVATION COMMISSION

3-NMOCC
1-Midland
1-File

5a. Indicate Type of Lease
State Fee
5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPEN OR PLUG BACK TO A RESERVOIR. USE "APPLICATION FOR PERMITS" (FORM C-101) FOR SUCH PROPOSALS.

1. GAS WELL OTHER

2. Name of Operator
GETTY OIL COMPANY

3. Address of Operator
P.O. BOX 249, HOBBS, NEW MEXICO 88240

4. Location of Well
UNIT LETTER **E** YEAR **1980** FEET FROM THE **NORTH** LINE AND **660** FEET FROM
West LINE, SECTION **17** TOWNSHIP **19-S** RANGE **37-E** NMPM.

7. Unit Agreement No.
8. Farm or Lease No.
STATE "J"
9. Well No.
1
10. Field and Pool Name
EUMONT
12. County
LEA

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO		SUBSEQUENT REPORT OF	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTER OR CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	DRIVING TEST AND CEMENT JOB <input type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, including pertinent dates, including estimated completion date for any proposed work) SEE RULE 1103.

Set CIBP @ 3810'. Dumped 7 sacks cement on plug. PBTD @ 3775'. Perforated with 4 holes 3494-96'. Spotted 375 gals. 7-1/2% LST NE Acid from 3721-3492'. Perforated 3514'-3716' with 27 shots. Treated with 6,000 gals. 7-1/2% LST NE Super Flo Acid, 116,000 SCF N₂. Set 2-3/8" tubing @ 3267', packer @ 3202'. Swabbed dry - Shut well in, pending evaluation of Upper Queen Zone.

Edgins 10/1/76

8. I hereby certify that the information above is true and complete to the best of my knowledge.

ORIGINAL SIGNED BY:

C. L. Wade

SIGNED C.L. Wade: TITLE AREA SUPERINTENDENT DATE 9-30-75

Orig. Signed by John Edgins

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: