

OIL CONSERVATION DIVISION

P. O. BOX 2088

Form C-103
Revised 10-1-78

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LAND OFFICE	
OPERATOR	

SANTA FE, NEW MEXICO 87501
0+5-NMOC-D-Hobbs
1-File
1-Engr RH
1-Foreman HC
11-WIO's
1-Laura Richardson

5a. Indicate Type of Lease State ☒ For ☐
5. State Oil & Gas Lease No. B-243

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 "APPLICATION FOR PERMIT - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Unit Agreement Name Myers Langlie Mattix Unit
2. Name of Operator Getty Oil Company	8. Farm or Lease Name
3. Address of Operator P.O. Box 730, Hobbs, NM 88240	9. Well No. 99
4. Location of Well UNIT LETTER I 1980 FEET FROM THE South LINE AND 660 FEET FROM East 36 TOWNSHIP 23S RANGE 36E N.M.P.M. THE LINE, SECTION TOWNSHIP RANGE N.M.P.M.	10. Field and Pool, or Wildcat Langlie Mattix
15. Elevation (Show whether DF, RT, GR, etc.) 3324 DF	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 ☒	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☐	OTHER ☐

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

- Back flow well to pit.
- Install BOP and pull tbq and pkr.
- TIH with workstring and bit and clean out to TD. POH.
- TIH with workstring and pkr to 3393' and set pkr.
- TIH with 1 5/8" tbq to 3675'.
- Spot 174 gallons of 15% HCL in open hole thru 1 5/8" tbq.
- Return well to injection down 2 7/8" - 1 5/8" annulus for 6 hours.
- Repeat steps 6 and 7, (9) nine more times.
- POH with 1 5/8" tbq.
- POH with 2 7/8" tbq & pkr.
- TIH with injection tbq and pkr to 3393' and set pkr.
- Return to injection.
- Run injection profile.

THE COMMISSION MUST BE NOTIFIED
24 HOURS PRIOR TO COMMENCING WORK

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

SIGNED D.R. Crockett TITLE Area Superintendent DATE June 2, 1983

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JUN 6 1983

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
JUN 3 1983
O.C.D.
HOBBS OFFICE