Copy to 5.7.

MOCC COPY

| Form 9-331 | UNITED CTATEC | | | Form approved. | |
|---|---|---|---------------|--|--|
| (May 1963) | UNITED STATES SUBMIT IN TRIPLICATE* DEPARTMENT OF THE INTERIOR (Other instructions on re- | | on re- | Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO. | |
| | GEOLOGICAL SURV | EY | | LC-029418 A | |
| | JNDRY NOTICES AND REPORT IN THE PROPERTY OF T | | | . IF INDIAN, ALLOTTEE OR TRIBE NAME | |
| 1. | | A C L L I V E | 7 | . UNIT AGREEMENT NAME | |
| ME'L X MEI | LL OTHER | FFB D D same | | Skelly Unit | |
| 2. NAME OF OPERATO | | FEB 2 2 1978 | l° | . FASH OR LEASE NAME | |
| Getty Oil Co | | | , WELL NO. | | |
| P.O. Box 730 | Hobbs, New Mexico 88240 L (Report location clearly and in accordance w | O. C. C. ARTEBIA, OFFICE ith any State requirements. | 1 | 36 0. FIELD AND POOL, OR WILDCAT | |
| See also space 17 At surface | 660 FSL AND 60 | io FEL | | rayburg Jackson 38 | |
| | 660 FSL AND DE | <i>30 1</i> | | SURVEY OR AREA | |
| 14. PERMIT NO. 15. ELEVATIONS (Sho | | ether DF, RT, GR, etc.) | | 77 - 1/-31 12. COUNTY OR PARISH 13. STATE | |
| | | 3907 D.F. | | Eddy N.M. | |
| 16. | Check Appropriate Box To Indi | cate Nature of Notice, Repo | ort, or Oth | | |
| | | | | T REPORT OF: | |
| TEST WATER SH | UT-OFF PULL OR ALTER CASING | WATER SHUT-OFF | | REPAIRING WELL | |
| FRACTURE TREAT | | FRACTURE TREATME | ENT | ALTERING CASING | |
| SHOOT OR ACIDIZ | [] | SHOOTING OR ACIDI | IZING | ABANDGNMENT* | |
| REPAIR WELL | CHANGE PLANS | (Other) | rt results of | multiple completion on Well | |
| 17 SUPPLIES PROPER | g cement above 7-Rivers (Clearly state all to life well is directionally drilled, give subsurfock.) | Completion o | r Recompleti | ion Report and Leg form.) | |
| (2) Run Cem (3) Perfora (4) Run Tem (5) Drill o (6) Rerun t | ds and tubing. ent Bond Log. te and bring cement above to perature Survey. ut cement. ubing and rods. ell on production. | op of 7-Rivers. | | | |
| | | | | ECEIVED FEB 1 6 1978 | |
| | | · | , \ | FEB I O P. J. S. GENLUGICAL SURVEY ARTESIA, NEW MEXICO | |
| | | | | | |

(This space for Federal or State ffice use)

18. I hereby certife that the foregoing as true and correct