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# NEW MEXICO OIL CONSERVATION COMMISSION

3-NMOCC-ARTESIA  
1-R. J. STARRAK-TULSA

1-A. B. CARY-MIDLAND  
1-FILE

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

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## SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE APPLICATION FOR PERMIT TO DRILL (FORM C-101) FOR SUCH PROPOSALS.

MAY 1 1979

|                                                                                                                  |                                            |                                                                  |                                                                                                                                            |                                                          |
|------------------------------------------------------------------------------------------------------------------|--------------------------------------------|------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | 2. Name of Operator<br>Getty Oil Company ✓ | 3. Address of Operator<br>P. O. Box 730, Hobbs, New Mexico 88240 | 4. Location of Well<br>UNIT LETTER M 990 FEET FROM THE South LINE AND 990 FEET FROM THE West LINE, SECTION 16 TOWNSHIP 17S RANGE 31E NMPH. | 5. Elevation (Show whether DF, RT, GR, etc.)<br>3760' DF |
|------------------------------------------------------------------------------------------------------------------|--------------------------------------------|------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|

|                                                                                                      |                                        |                             |                                     |                  |                                                    |                    |
|------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------------------|-------------------------------------|------------------|----------------------------------------------------|--------------------|
| 5a. Indicate Type of Lease<br>State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> | 5. State Oil & Gas Lease No.<br>B-1565 | 7. Unit Agreement Name<br>- | 8. Farm or Lease Name<br>State "AZ" | 9. Well No.<br>1 | 10. Field and Pool, or Wildcat<br>Grayburg Jackson | 12. County<br>Eddy |
|------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------------------|-------------------------------------|------------------|----------------------------------------------------|--------------------|

|                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 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"/><br>TEMPORARILY ABANDON <input type="checkbox"/><br>PULL OR ALTER CASING <input type="checkbox"/><br>OTHER <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/><br>CHANGE PLANS <input type="checkbox"/><br>REMEDIAL WORK <input type="checkbox"/><br>COMMENCE DRILLING OPNS. <input type="checkbox"/><br>CASING TEST AND CEMENT JOBS <input type="checkbox"/><br>OTHER <input type="checkbox"/> Casing Connections <input checked="" type="checkbox"/> |

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.

Riser on 10 3/4" OD and 7" OD casing brought to surface.

Inspected by Bird Jones (USGS) on 4-27-79.

|                                                                                                              |                                    |                          |
|--------------------------------------------------------------------------------------------------------------|------------------------------------|--------------------------|
| 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. |                                    |                          |
| SIGNED <u>D. R. Crockett</u>                                                                                 | TITLE <u>Area Superintendent</u>   | DATE <u>4-27-79</u>      |
| APPROVED BY <u>Mike Williams</u>                                                                             | TITLE <u>OIL AND GAS INSPECTOR</u> | DATE <u>MAY - 2 1979</u> |
| CONDITIONS OF APPROVAL, IF ANY:                                                                              |                                    |                          |