

O+4-USGS

1-File COPY TO O.C.

Form 9-331
Dec. 19731 -Admin. Unit-Midland
1 -Forem (EF)
1 - Engineer (PWS)
UNITED STATESForm Approved.
Budget Bureau No. 42-R1424DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

GUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different formation. Use Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other ☐
2. NAME OF OPERATOR
Getty Oil Company /
3. ADDRESS OF OPERATOR
P. O. Box 730 Hobbs, New Mexico 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: Unit Ltr. L, 1980' FSL & 660' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
- FRACTURE TREAT ☐
- SHOOT OR ACIDIZE ☐
- REPAIR WELL ☐
- PULL OR ALTER CASING ☐
- MULTIPLE COMPLETE ☐
- CHANGE ZONES ☐
- ABANDON* ☐
- (other) ☐ Convert to injection

SUBSEQUENT REPORT

- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐

5. LEASE

LC-029420B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Skelly Unit

8. FARM OR LEASE NAME

Skelly Unit

9. WELL NO.

14

10. FIELD OR WILDCAT NAME

Zona

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 21 17S 31E

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

3766 DF

REQUEST FOR APPROVAL TO:

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- MULTIPLE COMPLETE ☐
- CHANGE ZONES ☐
- ABANDON* ☐
- (other) ☐ Convert to injection

SUBSEQUENT REPORT

- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐

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MAY 7 1981

(This report results of multiple completion or zone change on Form 9-330.)

U.S. GEOLOGICAL SURVEY
HOBBS, N.M.

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.)*

1. Rig up pulling unit.
2. Install B.O.P.
3. P.O.H. with tubing and rods.
4. RIH with bit and scrapper and clean to TD.
5. POH and run back in with tubing and packer.
6. Set packer and acidize.
7. Swab load.
8. POH and run back in with AD-1 tension packer and 2 3/8 IPC tubing and set at + 2060'.
9. Convert to injection.

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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 Superintendent DATE

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

Subject to NADCD approval.

*See Instructions on Reverse Side

APPROVED

MAY 13 1981

JAMES A. GILLHAM
DISTRICT SUPERVISOR