Form 9-331 UNITED STA (May 1968) DEPARTMENT OF TH	TES SUBMIT IN TRIPLICATES  IF INTERIOR verse side)	Budget Bureau No. 42-R1424  5. LEASE DESIGNATION AND SERIAL NO.
GLULOGICAL SURVEY N. M. O. C. C. JPY		LC - 029419 (A)
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—" for such proposals.)		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
i.  OIL GAS OTHER Injector	REGELVED	7. UNIT AGREEMENT NAME Skelly Unit
2. NAME OF OPERATOR		8. FARM OR LEASE NAME
Getty Oil Company	A:10 1 7 1077	3 - 2 - 3 - 3 - 3 - 3
3. ADDRESS OF OPERATOR	AUG 1 7 19/7	9. WELL NO.
P. O. Box 730; Hobbs, New Mexico 88240  1. Location of Well (Report location clearly and in accordance with any State equipments.  See also space 17 below.)		10. FIELD AND POOL, OR WILDCAT-
At surface	ARTESIA, OFFICE	Grayburg-Jackson  11. sec., t., e., w., or blk. and
Unit J, 1980 FSL and 1980 FEL		SURVEY OR AREA
15 FIEVATIONS	Show whether DF, RT, GR, etc.)	22-1/S-31E 12. COUNTY OR PARISH! 13. STATE
		Eddv N.M.
	' DF	
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data Top 1 NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
	ING WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT  TEST WATER SHUT-OFF  PULL OR ALTER CAS.  MULTIPLE COMPLETI		ALTERING CASING
SHOOT OR ACIDIZE ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL CHANGE PLANS	(Other)	
(Other) xxx - bring up cement top	Completion or Recompl	of multiple completion on Well etion Report and Log form.)
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly 80 proposed work. If well is directionally drilled, give nent to this work.)	ate all pertinent details, and give pertinent dates, subsurface locations and measured and true vertices.	including estimated date of starting and depths for all markers and sones perti
1. Pull tubing and pkr. 2. Run cement bond log. 3. Perforate and bring cement 4. Run temperature survey. 5. Rerun tubing and pkr. 6. Place well back on injecti	top above 7-Rivers.	Control of the contro
18. I hereby certify that the foregoing is true and correct	A C	DATE August 9. 1977
SIGNED THE WAY COUNTY	TITLE Area Superintendent	DATE August 9, 19//
(This space for Federal or State office use)	TOWN TO	DATE
APPROVED BY	TITLE	

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

ACTING DISTRICT ENGINEER

ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side