5-USGS-ARTESTA

1-A.B. CARY-MIDLAND

1-R. J. STARRAK-TULSA

1-FILE

Form Approved.

Form	9-331
Dec	1973

Dec. 1973	Budget Bureau No. 42-R1424
UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	IC-029418 (b)
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
Do not use this form for proposals to drill or to deepen or plug back to a different eservoir. Use Form $9-331-C$ for such proposals.)	8. FARM OR LEASE NAME
1. oil gas Deal oil s Water Trains	Skelly Unit
1. oil gas well other Dual Oil & Water Inject	
2. NAME OF OPERATOR	114 10. FIELD OR WILDCAT NAME
Getty Oil Company 3. ADDRESS OF OPERATOR	Fren 7-Rivers
P. O. Box 730, Hobbs, NM 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA
below.) AT SURFACE: Unit Letter D 660' FNL & 660' FWL	Sec. 14-17S-31E
AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE Eddy New Mexico
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	** [
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	3919' DF
TEST WATER SHUT-OFF	•
FRACTURE TREAT	
SHOOT OR ACIDIZE	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Form 9-330.)
MULTIPLE COMPLETE [] [] [] CHANGE ZONES [] []	
ABANDON° 🗍	•
(other) Casing Connections	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stating including estimated date of starting any proposed work. If well is measured and true vertical depths for all markers and zones perting the starting of the s	directionally drilled, give subsurface locations and ent to this work.)*
Riser on $8 \frac{5}{8}$ OD and $\frac{5 \frac{1}{2}}$ OD casing by	RECEIVED
Inspected by B. W. Weaver (NNOCC) on	
·	MAY 7 1979
Inspected by Mike Williams (NEOCC) on	. 11073
Inspected by James Brasfield (USGS) on	
Inspected by Bird Jones (USGS) on	APR 2 6 1979 . ARTESIA. OFFICE
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	

Inspected by Bird Jones (USGS) on Subsurface Safety Valve: Manu. and Type 18. I hereby certify that the foregoing is true and correct TITLE ____Area Supt. DATE SIGNED (This space for Federal or State office use) ACTING DISTRICT ENGINEER

> U.S. GOULUGICAL SURVEY ARTESIA, NEW MEXICO