NMOCE SWELL OFFICE COPY

5-USGS-ARTESIA 1-R. J. STARRAK-TULSA 1-A.B. CARY-MIDLAND 1-FILE

Form 9-331 Dec. 1973

2. NAME OF OPERATOR

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 Form 9-331-C for such proposals.)

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,

Getty Oil Company 3. ADDRESS OF OPERATOR

(other) Casing Connections

18. I hereby certify that the foregoing is true and correct

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL

PULL OR ALTER CASING MULTIPLE COMPLETE **CHANGE ZONES** ABANDON *

APPROVED BY

UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	I.C-029418_(b)
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
not use this form for proposals to drill or to deepen or plug back to a different voir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME
oil gas	Lea "C"
well X well other	9. WELL NO.
NAME OF OPERATOR	8
Getty Oil Company	10. FIELD OR WILDCAT NAME
ADDRESS OF OPERATOR	Grayburg Jackson
P. O. Box 730, Hobbs, NA 88240 LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 11-17S-31E
AT SURFACE: Unit Letter K 1980' FSL & 1980' FWL AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE Eddy New Mexico
AT TOTAL DEPTH:	14. API NO. :
CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 3949' DF
UEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
T WATER SHUT-OFF	RECEIVED
AIR WELL	(NOTE: Report results of multiple confidence or zone
L OR ALTER CASING [] [] TIPLE COMPLETE [] []	Change on Form NASTRO. ID
NGE ZONES	U.S. GEULUGICAL SURVEY ARTESIA, NEW MEXICO
NDON*	M.S. BELL WEXTOO
er) Casing Connections	AKICSIII

Form Approved.

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly star including estimated date of starting any proposed work. If well is c measured and true vertical depths for all markers and zones pertine Riser on 8 5/8" OD and 5 1/2" OD casing brought to surface. RECEIVED Inspected by B. W. Weaver (NNOCC) on Inspected by Mike Williams (NMOCC) on MAY 2 1979 Inspected by James Brasfield (USGS) on Inspected by Bird Jones (USGS) on O. C. C. ARTESIA, OFFICE Subsurface Safety Valve: Manu. and Type ____ Set @ ____ Ft.

TITLE Area Supt. DATE 45 2 5 1070

*See Instructions on Reverse Side

This space for Federal or State office use)

ACTING DISTRICT ENGINEER