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

Form Approved.

Form 9-331 Dec. 1973

Dec. 1973	Budget Bureau No. 42-R1424
UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	IC-029419 (A)
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 differ eservoir. Use Form 9-331-C for such proposals.)	ent
eservoir. Use Form 9-331-C for such proposals.)	
1. oil v gas	Skelly Unit
well well other	9. WELL NO. 123
2. NAME OF OPERATOR	
Getty Oil Company	10. FIELD OR WILDCAT NAME
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	Sec. 22-1/5-31E
AT SURFACE: Unit Letter M 560' FSL & 660' FW. AT TOP PROD. INTERVAL:	L 12. COUNTY OR PARISH 13. STATE Eddy New Mexico
AT TOTAL DEPTH:	14. API NO.
6. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTIC	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 3812 Gr.
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	·
TEST WATER SHUT-OFF	• .
FRACTURE TREAT	
SHOOT OR ACIDIZE	
REPAIR WELL LI L	(NOTE: Report results of multiple completion or zone change on Form 9-330.) .
MULTIPLE COMPLETE	
CHANGE ZONES	
ABANDON*	•
(other) Casing Connections	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly 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 per	timent to this work.)
n' 0 5/011 op -m3 5 1/011 op gaging	brought to curface
Riser on $8 \frac{5}{8}$ OD and $5 \frac{1}{2}$ OD casing	brought to surface.
	RECEIVE
Inspected by B. W. Weaver (NNOCC) on	•
Inspected by Mike Williams (NFOCC) on	JUL 1 0 1979
Inspected by James Brasfield (USGS) on	·
Inspected by Bird Jones (USGS) on	APR 3 0 1979 . ARTESIA. OFFICE
Inspected by Bird Jones (USGS) On	

CONDITIONS OF APPROVAL, IF ANY

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

... DATE

Subsurface Safety Valve: Manu. and Type ______ Ft.

Will TITLE Area Supt. DATE

*See Instructions on Reverse Side

MAY 7 1979

APPROVED BY