Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

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CCC
ARTESIA, OFFICE

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
LC-029420-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

1.
OIL WELL [X]   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 and in accordance with any State requirements.
See also space 17 below.)
At surface

UNIT LETTER K, 2130' FSL, AND 1980' FWL

7. UNIT AGREEMENT NAME
Skelly Unit

8. FARM OR LEASE NAME

9. WELL NO.
151

10. FIELD AND POOL, OR WILDCAT
[illegible]

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 15, T-17-S, R-31-E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3867' GL

12. COUNTY OR PARISH
Eddy

13. STATE
New Mexico

16.
Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF [ ]	PULL OR ALTER CASING [ ]	WATER SHUT-OFF [X]	REPAIRING WELL [ ]
FRACTURE TREAT [ ]	MULTIPLE COMPLETE [ ]	FRACTURE TREATMENT [ ]	ALTERING CASING [ ]
SHOOT OR ACIDIZE [ ]	ABANDON* [ ]	SHOOTING OR ACIDIZING [ ]	ABANDONMENT* [ ]
REPAIR WELL [ ]	CHANGE PLANS [ ]	(Other)	
(Other)		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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.) *

Drilled 7 7/8" hole to 2600' and set 5 1/2" 15.5# casing at 2599' on 6-18-78.

B. J. Cemented with 450 sxs. Class "C" Cement, 2% AZ, 10# Salt/sk, 1/4# Cello

Flakes and 200 sxs. Class "C" Cement, with 2% CaCl. Cement Circulated. Tested

casing with 1600# for 30 minutes with no drop in pressure.

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ARTESIA, NEW MEXICO

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

SIGNED _____ Dale R. Crockett _____   TITLE _____ AREA SUPERINTENDENT _____   DATE _____ 7-24-78 _____

(This space for Federal or State office use)

APPROVED BY _____   TITLE _____ ACTING DISTRICT ENGINEER _____   DATE _____ JUL 28 1978 _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side