

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TR  
(Other instruct.  
verse side)CATE\*  
on reCopy to 27  
Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-029418-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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7. UNIT AGREEMENT NAME

Skelly Unit

8. FARM OR LEASE NAME

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9. WELL NO.

143

10. FIELD AND POOL, OR WILDCAT

Fren 7-Rivers

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

SEC 23 T-17-S R-31-E

12. COUNTY OR PARISH

Eddy

13. STATE  
New Mexico1. OIL ☒ GAS ☐  
WELL 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 requirement. See also space 17 below.)  
At surface

UNIT LTR G, 231' FNL, AND 1980' FEL

14. PERMIT NO.

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

3877' GL

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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 2650' and set 5 1/2" 14# casing at 2637' on 7-5-78. B.J. cemented with 550 sxs. Lite Wate, 10# Salt, 1/4# Flo-Cel, 200 sxs. Class "C" Cement with 2% CaCl. Cement circulated 25 sxs. Tested casing with 1200# for 30 minutes with no drop in pressure.

RECEIVED  
AUG 22 1978  
U.S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED

Dale R. Crockett

Dale R. Crockett

TITLE

Area Supt.

DATE 8-2-78

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACTING DISTRICT ENGINEER

DATE

AUG 22 1978