

Drawer DD  
Artesia, NM 88210

C/S'n

O+5 - USGS - P.O. Box 1857 1 - Engr. LM 1 - Laura Richardson-Midland  
Roswell, NM 88201 1 - Foreman EF 1 - File Form Approved.  
Form 9-331 Budget Bureau No. 42-R1424  
Dec. 1973

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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.)

1. oil well ☐ gas well ☐ other Water Injection Well  
2. NAME OF OPERATOR  
Getty Oil Company  
3. ADDRESS OF OPERATOR  
P.O. Box 730 Hobbs, NM 88240  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: Ltr. J, 1980' FSL, 1980' FEL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input checked="" type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>
(other)	<input type="checkbox"/>		<input type="checkbox"/>

5. LEASE  
LC-029418(b)  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
Lea "D"  
9. WELL NO.  
6  
10. FIELD OR WILDCAT NAME  
Grayburg Jackson  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 26, T17S, R31E  
12. COUNTY OR PARISH  
Eddy  
13. STATE  
NM  
14. API NO.  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3837' DZ

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

1. Pull rods, pump, tubing, and injection packer.
2. Run bit and casing scraper to TD.
3. Set treating packer at 3750'.
4. Acidize open hole with 3000 gal. 15% Hcl.
5. Flow back load.
6. TOH w/treating packer.
7. TIH w/5 1/2" injection packer, set at  $\pm$  3790', and return to injection.

RECEIVED

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ MAR 9 1983 \_\_\_\_\_ Ft.

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

SIGNED \_\_\_\_\_ TITLE Area Superintendent  
Date \_\_\_\_\_  
APPROVED (This space for Federal or State office use)  
MINERALS MGMT. SERVICE  
ROSWELL, NEW MEXICO

(Orig. Sgl.) PETER W. CHESTER  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

MAR 11 1983  
FOR  
JAMES A. GILLHAM  
DISTRICT SUPERVISOR\* See Instructions on Reverse Side