

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

1-JDM, Engr.
1-FILE

N.M.O.C.D. COF

C.9F

Form Approved.
Budget Bureau No. 42-R1424

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 ☐
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: Unit 1tr.F, 2180' FNL & 1980' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

- ☐
☐
☐
☐
☐
☐
☐
☒

5. LEASE
NM-12841
6. IF INDIAN, ALLOTTEE OR TRIBE NAME RECEIVED
7. UNIT AGREEMENT NAME
JUN 27 1980
8. FARM OR LEASE NAME
Cedar Canyon 10 O. C. D.
9. WELL NO.
1 ARTESIA, OFFICE
10. FIELD OR WILDCAT NAME
Cedar Canyon-Morrow Gas
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
10-24-29
12. COUNTY OR PARISH
Eddy
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
2997' KB

(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.)*

3/25/80 to 3/31/80

An attempt to recompleate to the Atoka or Strawn was made as outlined on the approved Form 9-331C (Application). Due to bad casing down hole, the workover was suspended. The well is shut-in for evaluation.

RECEIVED

JUN 25 1980

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Dale R. Crockett TITLE Area Superintendent DATE June 23, 1980

(This space for Federal or State office use)

APPROVED BY Peter M. Chester TITLE ACTING DISTRICT ENGINEER DATE JUN 23 1980

CONDITIONS OF APPROVAL, IF ANY: