Capy to St

5-USGS-ARTES

TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE

PULL OR ALTER CASING MULTIPLE COMPLETE **CHANGE ZONES** 

REPAIR WELL

ABANDON® (other)

JB, ENGR.

1-FILE

1-EF, FOREMAN

5. LEASE

Form Approved. Budget Bureau No. 42-R1424

Form 9-331 Dec. 1973

1-R. J. STAKKAK-TULSA 1-A. B. CARY-MIDLAND UNITED STATES

NMOCC

DEPARTMENT	OF	THE	INTERIOR
GEOLOGICAL S			RVEY

DEPARTMENT OF THE INTERIOR	IC-029419 (A)		
GEOLOGICAL SURVEY	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 Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME Skelly Unit		
reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME		
1. oil gas other Injection	9. WELL NO.		
2. NAME OF OPERATOR	58		
Getty Oil Company	10. FIELD OR WILDCAT NAME		
3. ADDRESS OF OPERATOR	Grayburg Jackson, Fren-7 River		
P. O. Box 730, Hobbs, New Mexico 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR		
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA		
below.)	Sec. 22, T-17S, R-31E		
AT SURFACE: Unit letter P, 510' FSL & 660' FEL	12. COUNTY OR PARISH 13. STATE		
AT TOP PROD. INTERVAL:	Eddy New Mexico		
AT TOTAL DEPTH:	14. API NO.		
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,			
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 3829' DF		
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF   RECE	IVED		

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.)\*

ARTERIA, OFFICE

- Pull tubing.
- Perforate and acidize Fren-7 Rivers Zone.
- Run dual retrievable packer to + 2000' and a permanent single packer to + 3200'.

Inject into the Fren-7 Rivers Zone and the Grayburg-Jackson Zone.

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 Supt. DATE	1-3-79
APPROVED BY APPROVAL, IF ANY:  (This space for Federal or State office use)  ACTING DISTRICT ENGINEER DATE  CONDITIONS OF APPROVAL, IF ANY:	JAN 4 1979
CONDITIONS OF APPROVAL, IF ANY:	