

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

N. M. OIL CONS. COMMISSION
P.O. BOX 1980
4665 NEW MEXICO 88240

Form Approved.
Budget Bureau No. 42-R1424

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 ☒ gas ☐
well well other

2. NAME OF OPERATOR

Getty Oil Company

3. ADDRESS OF OPERATOR

Drawer DD, Levelland, Texas 79336

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 1650' FSL & 660' FEL Sec. 35-13S-33E

AT SURFACE:

AT TOP PROD. INTERVAL: Wolfcamp

AT TOTAL DEPTH: Pennsylvanian

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

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

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

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5. LEASE

NM 01124

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Willard Beaty

9. WELL NO.

5

10. FIELD OR WILDCAT NAME

Lazy J. Penn

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

Section 35-13S-33E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

4207 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.)*

This work was done to open additional interval in the Wolfcamp Formation. Tagged PBTD at 9921', No fill. Ran GR/CN from 9921 to 9421'. Perfed 5" casing with 2 JSPF in following intervals: 9841-57', 9762-84', 9724-44'. Set CIBP with 1 sk. on top at 9825'. Acidized 9724'-84' with 2,000 gal. 20% NE-FE HcL. On fourth swab started flowing. Will evaluate and re-run rods and pump in well if needed.

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

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

SIGNED Clark Richards Clark Richards TITLE Operations Engr. DATE 9-13-83

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

ACCEPTED FOR RECORD

SEP 28 1983

*See Instructions on Reverse Side

ROSWELL, NEW MEXICO