NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION		Supersedes Old
SANTA FE	NEW MEXICO OIL CONSERVATION COMMIS	C-102 and C-103
FILE	THE MEXICO OIL CONSERVATION COMMIS	SION Effective 1-1-65
U.S.G.S.	3-NMOCC	5a. Indicate Type of Lease
LAND OFFICE	1-FILE	State Fee
OPERATOR		5, State Oil & Gas Lease No.
	<del></del>	B-7845
SU	NDRY NOTICES AND REPORTS ON WELLS	
(DO NOT USE THIS FORM FO	NDRY NOTICES AND REPORTS ON WELLS  R PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RES  LICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	SERVOIR.
1. OIL XX GAS WELL XX	OTHER.	7. Unit Agreement Name
2. Name of Operator GETTY OIL COMPANY		8, Farm or Lease Name STATE "M"
3. Address of Operator		9, Well No.
	BBS, NEW MEXICO 88240	3
4. Location of Well  J  UNIT LETTER	1650 SOUTH 1650	10. Field and Pool, or Wildcat  LOVINGTON ABO
EAST	36 16-S 36-	I NMPM (IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
	15. Elevation (Show whether DF, RT, GR, etc.) 3838 RT	12. County LEA
16. Che	ck Appropriate Box To Indicate Nature of Notice,	Report or Other Data
	- M	SUBSEQUENT REPORT OF:
		<b></b>
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	XX ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING O	PNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEME	BOL THE
	OTHER	
OTHER	——————————————————————————————————————	
17. Describe Proposed or Complete work) SEE RULE 1703.	od Operations (Clearly state all pertinent details, and give pertinent	dates, including estimated date of starting any proposed
perforations from  Perforated 5-1/2"  and 36' with 16 je 2,000 gals. 15% NE 1.9 BPM. In 22 ho	stic log and cement bond log. Tagged fil 8280 to 8350'. liner @ 8136, 53, 60, 64, 67, 76, 83, 88 ts. Ran Baker retrievable bridge plug ar FE acid. Final pressure 3300#, ISIP 210 urs pumped off. Re-treated with 5,000 ga 0#, minimum 2400#. Rate 2.7 BPM.	, 91, 96; 8201, 04, 19, 28, 34, and treating packer. Treated with 00#, 15 min. 1700#, overall rate
Pumping back load.		
18. I hereby certify that the informa ORIGINAL SIG	tion above is true and complete to the best of my knowledge and bel	ief.
C. L. Wa	, do	NTAIM
SIGNED	AREA SUPERINTEND	DENT May 14, 1973
APPROVED BY OR JWR	** TITLE	DATE
JOHOTHORS OF AFERDVAL, IF	*** **	