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# NEW MEXICO OIL CONSERVATION COMMISSION

3-NMOCC  
1-File

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	

## 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 "APPLICATION FOR PERMIT - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator <b>GETTY OIL COMPANY</b>		8. Farm or Lease Name <b>STATE "P"</b>
3. Address of Operator <b>P.O. BOX 249, HOBBS, NEW MEXICO 88240</b>		9. Well No. <b>5</b>
4. Location of Well UNIT LETTER <b>M</b> , <b>330</b> FEET FROM THE <b>SOUTH</b> LINE AND <b>330</b> FEET FROM THE <b>WEST</b> LINE, SECTION <b>32</b> TOWNSHIP <b>16-S</b> RANGE <b>37-E</b> NMMP.		10. Field and Pool, or Wildcat <b>LOVINGTON PADDOCK</b>
15. Elevation (Show whether DF, RT, GR, etc.)		12. County <b>LEA</b>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> <b>NIO WELL</b>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Request extension of shut-in status. Waiting on Working Interest Owners approval to Plug and Abandon.

*Expires 11-1-76*

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

ORIGINAL SIGNED BY:

**C. L. Wade**

SIGNED **C.L. Wade:**

TITLE **AREA SUPERINTENDENT**

DATE **10-22-75**

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE **1975**

CONDITIONS OF APPROVAL, IF ANY:

WLG/bh