

NO. OF PIES RECEIVED		
DISTRIBUTION		
SANTA E		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

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 type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name	
9. Well No.	
10. Field and Pool, or Wildcat	
12. County	

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

1. Name of Operator
Getty Oil Company

3. Address of Operator
Box 249, Hobbs, New Mexico 88240

4. Location of Well
UNIT LETTER **I**, **2310** FEET FROM THE **South** LINE AND **990** FEET FROM THE **East** LINE, SECTION **29** TOWNSHIP **18-S** RANGE **38-E** NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
3653 DF

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

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.

Well is currently pumping 40 BO and 19 BWPD from San Andres perforations 4202-25'.

It is proposed to additionally perforate the San Andres 4155-70, 4177-85', and 4192-97', and treat with 2,000 gals. 15% HCL and 400 lb. of 50-50 Benzoic acid salt diverter, in an attempt to restore well to top allowable.

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

Original Signed by
SIGNED C. L. WARD TITLE Area Supt. DATE 2-13-73

APPROVED BY Joe D. Raney TITLE Dist. 1, Supv. DATE

CONDITIONS OF APPROVAL, IF ANY: