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NEW MEXICO OIL CONSERVATION COMMISSION

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.	

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator GETTY OIL COMPANY		8. Term or Lease Name W. D. GRIMES
3. Address of Operator P.O. Box 249, Hobbs, New Mexico 88240		9. Well No. 6
4. Location of Well UNIT LETTER I , 1370.5 FEET FROM THE South LINE AND 557 FEET FROM THE East LINE, SECTION 29 TOWNSHIP 18 S RANGE 38 E NMPM.		10. Field and Pool, or Wellbore Undesignated
15. Elevation (Show whether DF, RT, GR, etc.) 3647 GL		12. County LEA

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"/>	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 checked="" type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <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.

Drilled 8-3/4" hole to 7050'. Set 7" 23# J-55 and N-80 casing at 7029'. Cemented with 180 sacks Class "C" 50-50 Diamix with 1/4# flocele per sack and 360 sacks Class "C" with .7 of 1% D-3 and 1/4# flocele per sack. Temperature survey showed top of cement on outside of 7" at 2200'. Released rig at 10 P.M. January 15, 1970. Rigged up pulling unit 1-20-70, and tested 7" casing with 1500# for 30 minutes, no drop in pressure.

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

TITLE **Area Superintendent**

DATE **February 13, 1970**

APPROVED BY *Leslie H. Clements* TITLE **Area Superintendent** DATE **February 13, 1970**

CONDITIONS OF APPROVAL, IF ANY: