

NEW MEXICO OIL CONSERVATION COMMISSION

3-NMOCC
 1-File

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LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
 State Fee
 5. State Oil & Gas Lease No.
 B-1565

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. Farm or Lease Name STATE "BA"
3. Address of Operator P.O. BOX 249, HOBBS, NEW MEXICO 88240	9. Well No. 9
4. Location of Well UNIT LETTER B, 660 FEET FROM THE NORTH LINE AND 2310 FEET FROM THE EAST LINE, SECTION 36 TOWNSHIP 17-S RANGE 34-E NMPM.	10. Field and Pool, or Wildcat VACUUM SAN ANDRES
15. Elevation (Show whether DF, RT, GR, etc.) 4006 D.F.	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 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"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input 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.

In an attempt to increase production, it is proposed to additionally perforate the San Andres 4371, 87, 94; 4418, 29, 32, 44, 49, 54, 82, 90, 4508, 32 70; and 4579. Treat new perforations with 3,000 gals. 15% HCL NE Acid.

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

SIGNED C.L. Wade TITLE AREA SUPERINTENDENT DATE 12-23-74

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

WLG/bh