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# NEW MEXICO OIL CONSERVATION COMMISSION

3-100000

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 -" (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, HOMER, NEW MEXICO 88240		9. Well No. 10	
4. Location of Well UNIT LETTER <u>A</u> <u>660</u> FEET FROM THE <u>HOMER</u> LINE AND <u>760</u> FEET FROM THE <u>EAST</u> LINE, SECTION <u>36</u> TOWNSHIP <u>17-S</u> RANGE <u>34</u> N.M.P.M.		10. Field and Pool, or Wildcat VACUUM GLORIETA	
15. Elevation (Show whether DF, RT, GR, etc.) 4001 D.F.		12. County LLA	

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

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <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.

The well is currently pumping approximately 3 MO and 11 BOPD. It is proposed to additionally perforate the Glorieta as follows:

Perforate 6050, 58, 60, 60, 62, 64, 86, 99; 0101, 03, 10, 12, 14, 16, and 18' (15 shots). Treat with 7500 gallons of 20% HCL Acid.

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. Wade C. L. Wade

TITLE AREA SUPERINTENDENT

DATE 12-7-73

APPROVED BY Joe D. Ramsey  
Chf. I. Supv.

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY

WLG/bh