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NEW MEXICO OIL CONSERVATION COMMISSION

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Form C-101
Revised 1-1-65

5A. Indicate Type of Lease

STATE ☒ FEE ☐

5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name Getty 2 State	
2. Name of Operator Getty Oil Company		9. Well No. 2	
3. Address of Operator P. O. Box 730, Hobbs, New Mexico 88240		10. Field and Pool, or Wildcat East Grama Ridge-Morrow	
4. Location of Well UNIT LETTER <u>H</u> LOCATED <u>2080</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>2</u> TWP. <u>22-S</u> RGE. <u>34-E</u> NMPM		11. County Lea	
12. Proposed Depth 13,400		13A. Formation Morrow	
12A. Kind & Status Plug. Bond Blanket Bond		12B. Drilling Contractor Pending	
21. Elevation (Show whether Dr, R, etc.) 3614.0 G.L.		22. Approx. Date Work will start Immediately	

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
26"	20"	94#	40	Ready mix	Surface
17 1/2"	13 3/8"	48#	1100	1200	Surface
12 1/4"	9 5/8"	36# & 40#	5,700	3000	Surface
8 1/2"	7"	26#	11,100	2000	Surface
6 1/8"	5"	18#	13,400	300	Liner Top

1. The above casing program will be used to drill to the Morrow formation and any other productive formations. Our mud system will be inverted oil base from 11,100' to 13,400' and brine and brackish water from surface to 11,100'. The Morrow will be perforated selectively according to electric logs.

2. See Attachment for BOP'S and Choke Manifold.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM; IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

Signed [Signature] Title Area Superintendent Date April 30, 1980

(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT 1 DATE MAY 1 1980

CONDITIONS OF APPROVAL, IF ANY: