N. M. OIL CONS. COMMISSION P. O. BOX 30

0+5 MMS-Roswell 1-Engr. JM 1-Foreman	L- File 8- WIO's
9-331	Form Approved. Budget Bureau No. 42–R1
UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	NM-12846
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
not use this form for proposals to drill or to deepen or plug back to a different ervoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME
	Federal 15
oil gas X other	9. WELL NO.
NAME OF OPERATOR	1 POPULI DOST NAME
Getty Oil Company	10. FIELD OR WILDCAT NAME
ADDRESS OF OPERATOR	Morrow 11. SEC., T., R., M., OR BLK. AND SURVE
P.O. Box 730, Hobbs, NM 88240	The same of the sa
LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	Sec. 15, T-22S, R-33E
below.) - 10001 ECT & 1000 FET	
AT SURFACE: Unit itr. J, 1980 FSE & 1980 FEE AT TOP PROD. INTERVAL:	Lea NM
AT TOTAL DEPTH:	14. API NO.
. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	विप्तिमा स्थापन अस्ति
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND
OUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	3749.7 G.L.
ST WATER SHUT-OFF U	
HOOT OR ACIDIZE	
PAIR WELL	(NOTE: Report results of multiple completion of change on Form 9–330.) 그 중 중 및 중
JLL OR ALTER CASING L	change on Form 9–330.)
ULTIPLE COMPLETE	
BANDON*	tense of constraints
other) Change Name	୍ର ବ୍ୟବ୍ୟ କ୍ରିକ୍ୟୁଲ୍ଲ
7. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stincluding estimated date of starting any proposed work. If well is measured and true vertical depths for all markers and zones pertin	ent to this work.)*
We are requesting a lease name change to: Fe	ederal 15 Com "A" No. 1
	MEAR THE
	以見込む。以外は
	45
	2 1 3 1982 1 3
	생각 중심 등 기계 기계 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등
	OIL & CAS
	MINERALS MORT SERVICE
	ROSWELL, NEW MEXICO
Subsurface Safety Valve: Manu. and Type	Set @
18. I hereby cartify that the foregoing is true and correct	

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APPROVED BY SEL PETER W. CHESTER TITLE

DEC 1 0 1982

JAMES A. GILLHAM See Instructions on Reverse Side DISTRICT SUPERVISOR

CONDITIONS OF APPROVAL, IF ANY

FOR