

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on  
reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 21644

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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—" for such proposals.)

1. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
Getty Oil Company

3. ADDRESS OF OPERATOR  
P. O. Box 1351, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

Unit Letter P, 660' FSL & 660' FEL, Sec. 25-23S-36E

7. UNIT AGREEMENT NAME

Myers Langlie-Mattix Unit

8. FARM OR LEASE NAME  
Myers Langlie-Mattix Unit

9. WELL NO.

38

10. FIELD AND POOL, OR WILDCAT

Langlie-Mattix  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 25-23S-36E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3340' DF

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF   
FRACTURE TREAT   
SHOOT OR ACIDIZE   
REPAIR WELL   
(Other)

PULL OR ALTER CASING   
MULTIPLE COMPLETE   
ABANDON\*   
CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF   
FRACTURE TREATMENT   
SHOOTING OR ACIDIZING   
(Other) Casing Connections

REPAIRING WELL   
ALTERING CASING   
ABANDONMENT\*

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Riser on 10-3/4" OD and 7-5/8" OD Casing brought to surface.

Riser on 7-5/8" OD and 5-1/2" OD Casing brought to surface.

Inspected by L. A. Clements on March 5, 1977.

18. I hereby certify that the foregoing is true and correct

(Signed) D. R. Crow  
SIGNED D. R. Crow

TITLE Lead Clerk

DATE March 14, 1977

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

