

NEW MEXICO OIL CONSERVATION COMMISSION

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LAND OFFICE		
OPERATOR		

5d. Indicate Type of Lease	
State ☐	Fee ☒
5. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO RE-ENTER OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.)

1. ☐ OIL WELL ☐ GAS WELL ☐ OTHER- Injection	7. Unit Agreement Name Myers Langlie Mattix Un
2. Name of Operator Getty Oil Company	8. Farm or Lease Name Myers Langlie Mattix Un
3. Address of Operator P.O. Box 730 Hobbs, New Mexico 88240	9. Well No. 239
4. Location of Well UNIT LETTER <u>I</u> <u>1980'</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>12</u> TOWNSHIP <u>24S</u> RANGE <u>36E</u> N.M.P.M.	10. Field and Pool, or Wildcat Langlie Mattix
15. Elevation (Show whether DF, RT, GR, etc.) 3328' 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 ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	COMMENCE DRILLING OPNS. ☐
PULL OR ALTER CASING ☐	CASING TEST AND CEMENT JOB ☐
OTHER Recment casing ☐	OTHER ☐
PLUG AND ABANDON ☐	ALTERING CASING ☐
CHANGE PLANS ☐	PLUG AND ABANDONMENT ☐

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.

- (1) Rig up pulling unit.
- (2) Install BOP and pull tubing and packer.
- (3) Set retrievable BP @ 3300' and test casing.
- (4) Run cement bond log to find top of cement.
- (5) Perforate 2 holes at top of cement.
- (6) Establish circulation down casing and out bradenhead.
- (7) Pump 50 barrels color dyed plug to determine cement volume.
- (8) Mix sufficient cement to circulate to surface.
- (9) Displace cement within 100 feet of perforations.
- (10) WOC 24 hours.
- (11) Drill out cement and test casing.
- (12) Pull BP.
- (13) Run tubing and packer and put on injection.

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

SIGNED Walter J. P. [Signature] TITLE Area Superintendent DATE 1-31-78

APPROVED BY [Signature] TITLE [Signature] DATE [Signature]

CONDITIONS OF APPROVAL, IF ANY:

FEB 21 1978

WILSON COUNTY COMM.
HOBBS, N. M.