STATE OF NEW MEXICO

ENERGY AND MINERALS DEPARTMEN	ENERGY	ANO	MINERALS	DEPARTME	NT
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we. or corice acceives		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.	1	
LAND OFFICE		
OPERATOR	1	

OIL CONSERVATION DIVISION

P. O. BOX 2088	Form C-103 · Revised 10-1-
SANTA FE, NEW MEXICO 87501	VEA 1250 10-1-
U.S.a.s. O+2 - NMOCD-P.O. Box 1980 1 - Foreman	5a. Indicate Type of Lease
Hobbs, NM 88240 1 - WIO's	State Foo
1 - Engr. 1 - File	5. State Oil & Gas Lease No.
SLINDRY NOTICES AND REPORTS ON WELLS	Manne
SUNDRY NOTICES AND REPORTS ON WELLS IDO NOT USE THIS FORM FOR PROPOSALS TO DAILL OF TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USC "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
1.	7, Unit Agreement Name
WELL OTHER- Injection Wells	7, O.M. Agreement Nume
2. Name of Operator	8. Form or Lease Hame
Getty Oil Company	Skelly Penrose B anut
3. Addrass of Operator	9. Well No.
P. O. Box 730 Hobbs, NM 88240	29
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER H 2112 FEET FROM THE NORTH LINE AND 660 FEET FROM	Tanglie Mattix
THE East LINE, SECTION 5 TOWNSHIP 23S RANGE NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
3348' DF	Lea
Check Appropriate Box To Indicate Nature of Notice, Report or Otl	ner Data
NOTICE OF INTENTION TO: SUBSEQUENT	REFORT OF:
PERFORM REMEDIAL WORK XX	ALTERING CASING
TEMPORARILY ABANDON COMMENCE DRILLING OPHS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING CASING TEST AND CEMENT JOS	
OTHER	
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including work) SEE RULE 1103.	estimated date of starting any process
work, see Role 1103.	starting any proposi
1. Shut injection and flow well back vigorously.	
2. Rig up pulling unit, install BOP, and pull tubing.	
3. GIH with workstring, collars, and bit and clean to TD.	
4. POH.	
5. GIH with workstring and packer. Set packer 80 ft. above top perfor	
6. Acidize with 1500 to 2000 gals. of 60/40 mixture of 15% acid and xy	ation.
7. Shut in for four hours:	Tene.
8. Flow back vigorously.	
9. Run injection tubing and packer.	
10. Place back on injection.	
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18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
A A Complete to the best of my knowledge and belief.	
Loll 10 6 both	
Dale R. Crockett vive Area Superintendent	DATE 9/17/81