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Form 9-331 (May 1963)	UNITED STATES SUBMIT IN TRIPLICATE Office Instructions on re DEPARTMENT OF THE INTERIOR verse side)		Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.				
	GEOLOGICAL SURVEY			LC-032452A			
	SUNDRY NOTICES AND REPORT to this torm for proposals to drill or to deepen or puse "APPLICATION FOR PERMIT_" for su		6. IF INDIAN,	ALLOTTEE OR !	TRIBE NAME		
1.			7. UNIT AGREE	7. UNIT AGREEMENT NAME			
OIL GAS OTHER Water Injection Well   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				Skelly Penrose "A" Unit 8. FARM OR LEASE NAME			
				Skelly Penrose "A" Unit 9. WELL NO.			
				57 10. FIELD AND POOL, OR WILDCAT			
	Letter J, 1980' FSL & 1980' FEL	, Sec. 9-23S-37E	Langlie- 11. SEC., T., R SURVEY	-Mattix ., M., OR BLK. A OR ABEA	AND		
<u>.</u>				<u>235-37E</u>	STATE		
14. PERMIT NO.	15. ELEVATIONS (Show wheth						
	3306'		Lea	Ne	w Mexico		
16.	Check Appropriate Box To Indica						
	NOTICE OF INTENTION TO:	SUBSE	QUENT REPORT OF	:			
TEST WATER S		WATER SHUT-OFF		PAIRING WELL TERING CASING			
FRACTURE TRE SHOOT OR ACH		FRACTURE TREATMENT SHOOTING OR ACIDIZING		ANDONMENT*	·		
REPAIR WELL	CHANGE PLANS	(Other)					
(Other) C	ement behind 7" OD casing X	(NOTE: Report resul Completion or Recom	pletion Report ar	id Log form.)			
proposed wo	USED OR COMPLETED OPERATIONS (Clearly state all per ork. If well is directionally drilled, give subsurface	tinent details, and give pertinent date locations and measured and true vert	es, including estim leal depths for al	nated date of 1 markers and	starting any zones perti-		
nent to this v	work.) *						
1) Morro in	workover unit. Pull injectio	n tubing and packer					
I.) MOVE IN	workover unit. Full injectio	n cubing and packer.					
2.) Perfora	te 7" OD casing with 2 shots i	n salt section.			-		
• <b>)</b> –							
3.) Test wa	ter flow, acidize if necessary	•					
4.) Flow ti	.ll pressure is depleted. Recc	rd pressure build-up, t	if any.				
5.) Cement	squeeze perforations in 7" OD	casing and circulate to	surface.				
6.) Set inj	ection tubing and packer.						
	well to active injection statu 3520-3606'.	s, injecting water thro	ough Langli	le-Mattix			
PCLID.	5520 5000 .						
				· .			
18. J hereby certif	y that the foregoing is true and correct						
SIGNED		Lead Clerk	APPR	ᡢᢣᢞᠮᢪᠮ	1977_		
	r Federal or State office use)			V V la h			
APPROVED BY TITLE			MAR	31937			
	OF APPROVAL, IF ANY:		BERNARD	MOROZ			
			CTING DISTR		EX		

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\*See Instructions on Reverse Side

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