

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER Water Injection | | 5. LEASE DESIGNATION AND SERIAL NO. NM 27721 | |
| 2. NAME OF OPERATOR Getty Oil Company | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME ----- | |
| 3. ADDRESS OF OPERATOR P.O. Box 730 Hobbs, New Mexico 88240 | | 7. UNIT AGREEMENT NAME ----- | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FNL & 1980 FEL, Sec. 29 | | 8. FARM OR LEASE NAME Myers Langlie Mattix Unit | |
| 14. PERMIT NO. | | 9. WELL NO. 19 | |
| 15. ELEVATIONS (Show whether DF, RT, CR, etc.) 3304 | | 10. FIELD AND POOL, OR WILDCAT Langlie Mattix | |
| | | 11. SEC., T., B., M., OR BLK. AND SURVEY OR AREA 29-23S-37E | |
| | | 12. COUNTY OR PARISH Lea | 13. STATE N.M. |

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

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|--|---|---|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING <input checked="" type="checkbox"/> Convert to WIW | ABANDONMENT* <input checked="" type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) _____ | |
| (Other) _____ | | (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.) *

Jetted and cleaned out open hole 3463'-3620'. Ran Gamma Ray Neutron log. Tested 7" casing with 1,000#,OK. Ran 2 3/8" Salta line tubing with Baker AD-1 tension packer set at 3440'. Shut In. 10-12-77

Waiting on water injection line and lease line agreement.

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

| | |
|--|----------------------------------|
| SIGNED <u>[Signature]</u> | TITLE <u>Area Superintendent</u> |
| (This space for Federal or State office use) | |
| APPROVED BY _____ | TITLE _____ |
| CONDITIONS OF APPROVAL, IF ANY: | |

*See Instructions on Reverse Side

DATE 12-14-77
ACCEPTED FOR RECORD
JAN 12 1978
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO