

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.
LEASE DESIGNATION AND SERIAL NO.

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 <u>Water Injection Well</u>	6. IF INDIAN, ALLOTTEE, OR TRIBE NAME -----
2. NAME OF OPERATOR <u>Getty Oil Company</u>	7. UNIT AGREEMENT NAME <u>Myers-Langlie-Mattix Unit</u>
3. ADDRESS OF OPERATOR <u>P. O. Box 1351, Midland, Texas 79702</u>	8. FARM OR LEASE NAME <u>Myers-Langlie-Mattix Unit</u>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <u>Unit Letter D, 990' FNL & 330' FWL, Sec. 34-23S-37E</u>	9. WELL NO. -----
14. PERMIT NO.	10. FIELD AND POOL, OR WILDCAT <u>50</u>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>3297' DF</u>	11. SEC., T., R., M., OR FLM. AND SURVEY OR AREA <u>Langlie-Mattix</u> <u>Sec. 34-23S-37E</u>
	12. COUNTY OR PARISH <u>Lea</u>
	13. STATE <u>New Mexico</u>

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) <u>Casing Connections</u> ☒	
(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 8 5/8" OD and 5 1/2" OD casing brought to surface.

Inspected by L. A. Clements on January 13, 1977.

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

(Signed)

D. R. Crow

TITLE Lead Clerk

DATE March 2, 1977

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD
MAR 7 1977

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

*See Instructions on Reverse Side