

N. M. OIL WELL
P.O. (1980)
HOBBS, NEW MEXICO 88240

0+6-FLM-Roswell, 1-File, 1-Engr Jim, 1-Foreman CK, 1-Mr. J.A.-Midland, 1-Laura Richardson

Form 9-331
Dec. 1973

1-JA, 1-BB 1-SH, 1-CP

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ gas ☐ other ☐
well well
2. NAME OF OPERATOR
Getty Oil Company
3. ADDRESS OF OPERATOR
P.O. Box 730, Hobbs, NM 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
Unit Ltr. B, 330' FNL & 1650 FEL
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

- | REQUEST FOR APPROVAL TO: | SUBSEQUENT REPORT OF: |
|---|--------------------------|
| TEST WATER SHUT-OFF <input type="checkbox"/> | <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | <input type="checkbox"/> |
| MULTIPLE COMPLETE <input type="checkbox"/> | <input type="checkbox"/> |
| CHANGE ZONES <input type="checkbox"/> | <input type="checkbox"/> |
| ABANDON* <input type="checkbox"/> | <input type="checkbox"/> |
| (other) Downhole Commingle | (X) |

5. LEASE
LC-049439 (b)
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
G.D. Riggs "B"
9. WELL NO.
8
10. FIELD OR WILDCAT NAME
Justis
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 1, T-26S, R-37E
12. COUNTY OR PARISH
Lea
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3030' GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

2/8/84 Pull rods and tbq. Ran sand pump.
2/9/84 Cleaned out 171' sand and 2' cement.
2/10/84 Drilled 5' cmt.
2/11/84 Drilled 2' cmt.
2/13/84 Ran 4 3/4" bit and bulldog bailer. Tagged @ 5038' and drld 7' cmt. and BP @ 5045'. Push to 5459' - 50' below perms. Pull bit.
2/14/84 Test tbq to 5000#. SN @ 5412'. Bottom @ 5444'. Ran 2" x 1 1/4" x 16' pump.
Well Downhole Commingled Blinbry - Queen.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED [Signature] TITLE Area Superintendent DATE February 16, 1984
Date [Signature]

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE _____ DATE _____
CONDITIONS OF APPROVAL MAY 14 1984

Carlsted NEW MEXICO *See Instructions on Reverse Side

RECEIVED

MAY 15 1984

O.C.D.
HOBBS OFFICE