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J.S.G.S.		
LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form O-107
Supersedes Old
C-102 and C-103
Effective 1-1-65

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR APPLICATION TO OIL OR GAS LEASE OR WELL BACK TO A DIFFERENT RESERVOIR. USE APPLICATION FOR REPORT ON OIL OR GAS LEASE FOR SUCH PURPOSES.)

OIL WELL ☐ GAS WELL ☐ OTHER: Injection well

Name of Operator
Getty Oil Company

Address of Operator
P. O. Box 730, Hobbs, New Mexico 88240

Location of Well
UNIT LETTER G 1980 FEET FROM THE North LINE AND 1980 FEET FROM
THE East LINE, SECTION 32 TOWNSHIP 23S RANGE 37E NMPH.

13. Elevation (Show whether DF, RT, GR, etc.)
3295' GR

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.
B-1327

7. Unit Agreement Name
Myers Langlie Mattix Unit

8. Farm or Lease Name
Myers Langlie Mattix Unit

9. Well No.
77

10. Field and Pool, or Valued
Langlie Mattix

12. County
Lea

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER <u>Convert to injection</u> ☒	CASING TEST AND CEMENT JOBS ☐	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1. Rig up pulling unit.
2. Pull rods and pump and lay down.
3. Install BOP.
4. Pull tubing and lay down.
5. Run Baker AD-1 packer on 2 3/8 internally plastic coated tubing to approximately 3350'.
6. Displace annulus with inhibited water and set packer.
7. Place well on injection injecting into Langlie Mattix perforations 3429-3684'.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Walter B. Baker TITLE Area Supt. DATE 9-28-78

APPROVED BY John R. Ryan TITLE Geologist DATE OCT 2 1978

CONDITIONS OF APPROVAL, IF ANY: