

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions
reverse side)

Form approved
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC-032545A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Getty Oil Company		Myers Langlie Mattix Unit	
3. ADDRESS OF OPERATOR P.O. Box 730, Hobbs, NM 88240		8. FARM OR LEASE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit Ltr. P, 685' FSL & 660' FEL		9. WELL NO. 252	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Langlie Mattix	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3312.1 GR		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 31, T-23S, R-37E	
		12. COUNTY OR PARISH Lea	
		13. STATE NM	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other) Spudded Well	<input checked="" type="checkbox"/>		

(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.) *

7/21/84 Move in and rig up Aztec Drilling Company. Spudded 12 1/4" hole @ 5:30 P.M. Drlg. 12 1/4" hole @ 532'. Ran 13 jts 516', 8 5/8", 24#, K-55 8rd, A cond. Set @ 530'. F.C. 493 Howco 100 sxs lite 1/4# flo- cele, 2% CaCl, 175 sxs "C", 2% CaCl. Plug down @ 6:15 A.M. Circ. 90 SXS.

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

SIGNED Dale R. Crockett TITLE Area Superintendent DATE July 27, 1984
(This space for Federal or State office use) ACCEPTED FOR RECORD

APPROVED BY SWP TITLE SWP DATE AUG 1 1984
CONDITIONS OF APPROVAL, IF ANY:

0+6-BLM-Carlsbad 1-File
1-Mr. J.A. Midland, 1-Engr RH
1-Foreman HS, HC, 1-JA, 1-BB
1-SH, 1-CP

*See Instructions on Reverse Side
NEW MEXICO

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.