

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
(Other instructions on
verse side)

Form approved.
Budget Bureau No. 42-R1424.
5. 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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Water Injection		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR		8. FARM OR LEASE NAME	
GETTY OIL COMPANY		West Dollarhide Queen Sand Unit	
3. ADDRESS OF OPERATOR		9. WELL NO.	
P. O. BOX 1351, MIDLAND, TEXAS 79702		19	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface		10. FIELD AND POOL, OR WILDCAT	
Unit Letter O, 330' FSL & 1650' FEL Sec. 30-24S-38E		Dollarhide Queen	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
15. ELEVATIONS (Show whether DF, RT, GR, etc.)		Sec. 30-24S-38E	
3152' DF		12. COUNTY OR PARISH	
		Lea	
		13. STATE	
		New Mexico	

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 checked="" 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)	<input type="checkbox"/>		<input 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.)*

- 1) Move in workover rig. Pull injection tubing and packer.
- 2) Set Cast Iron Bridge Plug at +3450' with 25 sacks cement on top.
- 3) Set 25 sack cement plug 2600-2800'.
- 4) Perforate 7" OD casing at 1300' with 2 shots.
- 5) Cement squeeze perms. 1300' with enough cement to leave 200' cement 1100-1300'.
- 6) Set 100 sack cement plug 1100-1300'.
- 7) Set 10 sack cement plug to surface.
- 8) Install dry hole marker.

All strings of casing will be left in the hole.
All intervals not cement will be filled with 10.2# mud.

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

SIGNED IRAZA and Franz

TITLE Dist. Production Manager

DATE 2-23-77

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED
AS AMENDED
DATE

MAR 2 1977

BERNARD MOROZ

ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side