

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

NM-10185

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 ☐

2. NAME OF OPERATOR

Getty Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 1351, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

Unit Letter O, 330' FSL & 1980' FEL, Sec. 30-24S-38E

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

West Dollarhide Drinkard Unit

8. FARM OR LEASE NAME

West Dollarhide Drinkard Unit

9. WELL NO.

32

10. FIELD AND POOL, OR WILDCAT

Dollarhide Tubb-Drinkard

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 30-24S-38E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3136' 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 ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐Casing Connections ☒(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 13-3/8" OD and 8-5/8" OD casing brought to surface.

Riser on 8-5/8" OD and 5-1/2" OD casing brought to surface.

Inspected by J. W. Runyan on February 24, 1977

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

SIGNED

(Signed) D. R. Crow

D. R. Crow

TITLE

Lead Clerk

DATE March 3, 1977

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
MAR 7 1977U. S. GEOLOGICAL SURVEY
BOBBS, NEW MEXICO

*See Instructions on Reverse Side