

# N. M. OIL CONS. COMMISSION

O+6-BLM - P.O. Box 1857  
Roswell, NM 88201  
P.O. BOX 1980  
HOBBS, NEW MEXICO 88240  
1 - Foreman CK 1 - File

Form 9-331  
Dec. 1973

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 ☒ well ☒ gas well ☐ other ☐

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.)  
AT SURFACE: Unit ltr. A 990' FNL & 990' FEL  
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 checked="" 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) <input type="checkbox"/>	<input type="checkbox"/>

5. LEASE  
NM-0349952

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.  
15

10. FIELD OR WILDCAT NAME  
Dollarhide Tubb-Drinkard

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 30, T24S, R38E

12. COUNTY OR PARISH  
Lea

13. STATE  
NM

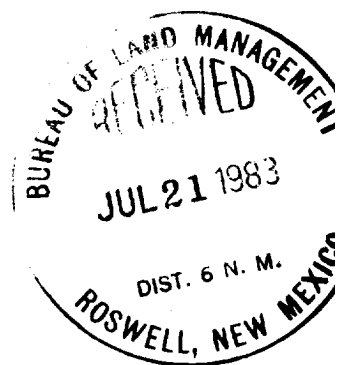
14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3196' DF

(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.)\*

1. Rig up pulling unit.
2. Run 4" flush joint liner 6698' to  $\pm$  3100'.
3. Cement liner in hole and drill out.
4. Selectively perforate Drinkard 6623'-6698' 2 SPF.
5. Acidize with  $\pm$  7,500 gals. 15% Hcl.
6. Place well on production.



Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Dale R. Crockett TITLE Area Superintendent DATE July 19, 1983  
(This space for Federal or State office use)

(Orig. Sgd.) PAUL W. CHESTER  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

AUG 22 1983