

# N. M. OIL & GAS COMMISSION

P. BOX 1890

O+5 - USGS-P.O. Box 1857 1 - Engr. Jim

Form 9-331  
Dec. 1973

Roswell, NM 88201

1 - Foreman CK

1 - Laura Richardson - Midland

1 - File

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 & 330' 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 ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☒  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) ☐

- ☐  
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5. LEASE

~~LC-069052~~ NM 10186

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.

46

10. FIELD OR WILDCAT NAME

Dollarhide Tubb-Drinkard

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

Sec. 31 - 24S - 38E

12. COUNTY OR PARISH

Lea

13. STATE

NM

14. API NO.

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

3148' D.F.

(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, pull rods and install BOP.
2. TIH with 6 1/8" bit and clean out to 6515'.
3. Run 5" slotted liner 6515' to 6360'.
4. Acidize with 10,000 gallons 15% Hcl.
5. Place well on production.

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED

Date R. Crockett

TITLE Area Superintendent

DATE September 28, 1982

APPROVED

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

OCT 6 1982

FOR

JAMES A. GILLHAM

DISTRICT SUPERVISOR

\*See Instructions on Reverse Side