Form 9-331 Dec. 1973

5-USGS-HOBBS 1-R. J. STARP -TULSA

1-A. B. CARY-...DLAND

1-CK, FOREMAN 1-ELB, ENGR

COPY TO O. C. C.

Form Approved.

1-BH, FILED CLK

Budget Bureau No. 42-R1424

UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	NM 10186
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME West Dollarhide Drinkard Unit
(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.)	8. FARM OR LEASE NAME West Dollarhide Drinkard Unit
1. oil gas other Water Injection Well	9. WELL NO. 47
2. NAME OF OPERATOR	10. FIELD OR WILDCAT NAME
Getty Oil Company	
3. ADDRESS OF OPERATOR	Dollarhide-Tubb Drinkard
P. O. Box 730, Hobbs, NM 88240 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
below.) AT SURFACE:Unitl Ltr. B, 480' FNL & 1650' FEL	Sec. 31, T-24S, R-38E
	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	Lea NM
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO.
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
AUDOFOLISM DEPORT OF	3136' DF
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
FRACTURE TREAT SHOOT OR ACIDIZE	
REPAIR WELL PULL OR ALTER CASING	(NOTE: Report results of multiple completion or zone change on Form 9-330.)
MULTIPLE COMPLETE	
CHANGE ZONES	
(other) Squeeze perforations, recomplete in lower	Drk and
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.)*	
WORK NOT PERFORMED.	
for not performed. The notice of intention off Let 23, 1978 is hereby	MEBETVE
1 Me mis	רון
1, 123, 1978 is newly	AUG 17 1979
canceled.	U. S. GEOLOGICAL SURV HOBBS, NEW MEXICO
Candled.	Hobbs, New Mexico

_____ Set @ .__ _ Ft. Subsurface Safety Valve: Manu. and Type 18. I hereby certify that the foregoing is true and correct 8-14-79 _ DATE _ (This space for Federal or State office use) ACCEPTED FOR RECORD ____ TITLE __ CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY HOBBS, NEW MEXICO

U. S. GEOLOGICAL SURVEY HOBBS, NEW MEXICO