

UNIT STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 Injection well	7. UNIT AGREEMENT NAME W. Dollarhide Drinkard Unit
2. NAME OF OPERATOR GETTY OIL COMPANY	8. FARM OR LEASE NAME W. Dollarhide Drinkard Unit
3. ADDRESS OF OPERATOR P.O. BOX 730, HOBBS, NEW MEXICO 88240	9. WELL NO. 51
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2310' FNL & 330' FEL	10. FIELD AND POOL, OR WILDCAT
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3144' DF
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 31-24S-38E	
12. COUNTY OR PARISH Lea	
13. STATE NM	

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 COMPLETION

ABANDONMENT

CHANGE PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT

(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.) *

We propose to repair the bradenhead communication on the subject well. This proposal may require resqueezing the 7" casing, if required, and possibly run 1000' of additional 5" liner. The liner will be cemented in the wellbore.

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

SIGNED

Dale R. Crockett

TITLE

Area Superintendent

DATE

9/19/84

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

12-12-84

CONDITIONS OF APPROVAL, IF ANY:

0+6-BLM-Carlsbad 1-Mr. J.A.-Midland
1-File, 1-Engr. Jim, 1-Foreman CK

Side *See Instructions on Reverse Side