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REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: 1-R.J. STARRAK-TULSA 1-A.B. CARY-MIDLAND SHOOT OR ACIDIZE PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 1-R.J. STARRAK-TULSA 1-R.J. STARRAK-T	GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
West Dollarhide Drinkard Unit West Dollarhide Drinkard Unit	=	West Dollarhide Drinkard Unit
2. NAME OF OPERATOR Getty Oil Company 3. ADDRESS OF OPERATOR P. O. Box 730, Hobbs, N.M. 88240 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: /650/FNL+ 33/D/F WL AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 17. REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: 18. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 19. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 10. FIELD OR WILDCAT NAME DOLLarhide Tubb—Drinkard 11. SEC. T. R., M., OR BLK. AND SURVEY OR AREA 3 1-245-38 E 12. COUNTY OR PARISH 13. STATE 14. API NO. 14. API NO. 15. ELEVATIONS (SHOW DF. KOB. AND WD) 3 1/4 OF 15. ELEVATIONS (SHOW DF. KOB. AND WD) 3 1/4 OF 15. ELEVATIONS (SHOW DF. KOB. AND WD) ATTACHED 16. A.B. CARY-MIDLAND 16. CHECK APPROPARIATE BOX TO INDICATE NATURE OF NOTICE, REPORT OF: 17. LA.B. CARY-MIDLAND 18. CARY-MIDLAND 19. CARROLLER 19. CHANGE SEED. 10. FIELD OR WILDCAT NAME DOLLARIDE TUBD—Drinkard 11. SEC. T. R., M., OR BLK. AND SURVEY OR AREA 3 1-245-38 E 12. COUNTY OR PARISH 13. STATE 14. API NO. 14. API NO. 3 1/4 OF 15. ELEVATIONS (SHOW DF. KOB. AND WD) 3 1/4 OF 15. ELEVATIONS (SHOW DF. KOB. AND WD) 3 1/4 OF 16. CHECK APPROPARIATE BOX TO INDICATE NATURE OF NOTICE, REPORT OF: 16. CHECK APPROPARIATE BOX TO INDICATE NATURE OF NOTICE, REPORT OF: 17. ELEVATIONS (SHOW DF. KOB. AND WD) 18. ELEVATIONS (SHOW DF. KOB. AND WD) 19. COUNTY OR PARISH 11. SEC. T. R., M., OR BLK. AND SURVEY OR AREA 3 1-245-38 E 11. SEC. T. R., M., OR BLK. AND SURVEY OR AREA 3 1-245-38 E 12. COUNTY OR PARISH 13. STATE 14. API NO. 14. API NO. 15. ELEVATIONS (SHOW DF. KOB. AND WD) 3 1/4 OF 16. CHECK APPROPAGE OF CARROLLER 19. API NO. 11. A.B. CARY-MIDLAND 19. API NO. 19. API NO. 11. A.B. CARY-MIDLAND 19. API NO. 11. A.B. CARY-M	1 oil — Pas —	West Dollarhide Drinkard Unit
3. ADDRESS OF OPERATOR P. O. Box 730, Hobbs, N.M. 88240 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: /650/FNL+23/D/FWL AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 17. STARRAK—TULSA 18. CARY—MIDLAND 19. CARY—MIDLAND 19. REQUEST FOR APPROVAL TO: 19. SUBSEQUENT REPORT OF: 19. STARRAK—TULSA 19. STARRAK—TULSA 19. STARRAK—TULSA 19. CARY—MIDLAND 19. CARY—MIDLAND 19. CARY—MIDLAND 19. CARY—MIDLAND 19. FRACTURE TREAT 10. 19. STARRAK—TULSA 19. CARY—MIDLAND 19. CARY—MIDLAND 19. CARY—MIDLAND 19. CARY—MIDLAND 19. FILET 19. CHANGE ZONES 10. PILET 20. PILET 20. COUNTY OR PARISH 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 212. COUNTY OR PARISH 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 212. COUNTY OR PARISH 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 212. COUNTY OR PARISH 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 212. COUNTY OR PARISH 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 212. COUNTY OR PARISH 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 212. COUNTY OR PARISH 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 212. COUNTY OR PARISH 11. SEC., T., R., M., OR BLK. AND SURVEY 212. COUNTY OR PARISH 213. STARCH 213. STAR	2. NAME OF OPERATOR	49
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 1650' FNL + 23/0' FNL AT TOP PROD. INTERVAL: AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 17. Lea New Mexcio 18. ELEVATIONS (SHOW DF. KDB. AND WD) 19. ELEVATIONS (SHOW DF. KDB. AND WD) 19. ELEVATIONS (SHOW DF. KDB. AND WD) 10. ELEVATIONS (SHOW DF. KDB. AND WD) 11. ELEVATIONS (SHOW DF. KDB. AND WD) 12. ELEVATIONS (SHOW DF. KDB. AND WD) 13. ILEVATIONS (SHOW DF. KDB. AND WD) 14. API NO. 15. ELEVATIONS (SHOW DF. KDB. AND WD) 16. CHECK APPROPALE IN THE STATE IN THE	3. ADDRESS OF OPERATOR	Dollarhide Tubb-Drinkard
AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: 16. CHECK APPROPOSED OF: 16. CHECK APPROPOSED OF: 16. CHECK APPROPOSED OF 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. Pull tubing and packer and install BOP.	4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA 31-245-38E
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 16. CHECK APPROPOSED WED, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 16. ELEVATIONS (SHOW DF, KDB, AND WD) 3 1/4 0 F 16. ELEVATIONS (SHOW DF, KDB, AND WD) 17. ELEVATIONS (SHOW DF, KDB, AND WD) 18. ELEVATIONS (SHOW DF, KDB, AND WD) 19. EL	AT TOP PROD. INTERVAL:	Lea New Mexcio
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: STEST WATER SHUT-OFF	16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	And
FRACTURE TREAT SHOOT OR ACIDIZE SHOOT OR SHOOT	•	
PULL OR ALTER CASING 1-C.K.ng.sten, FOREMAN MULTIPLE COMPLETE 1-FILE CHANGE ZONES 1-O-, WIO's -LIST ATTACHED ABANDON* (other) Recement Casing 1-BH, FIELD CLERK 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. Pull tubing and packer and install BOP.	FRACTURE TREAT	
CHANGE ZONES ABANDON* (other) Recement Casing 1	REPAIR WELL 1-E fittress PULL OR ALTER CASING 1-C. King sten	•
 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. Pull tubing and packer and install BOP. 	CHANGE ZONES	
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. Pull tubing and packer and install BOP.	(other) Receiver County	The state of the s
2. Pull tubing and packer and install BOP.	including estimated date of starting any proposed work. If well is d	irectionally drilled, give subsurface locations and

Run retrievable BP to approximately 6000'. Test RP and casing to 1000 psi.

Spot 10' of sand on top of BP.

Run cement bond log 6000' to surface.

Perforate and cement squeeze intervals not adequatley cemented.

WOC 24 hrs. 7.

Drill out cement and test casing to 1000 psi. 8.

Wash sand off BP and retrieve. 9.

Run packer and tubing and place well back on injection. 10.

Subsurface Safety Valve: Manu. and Type	Set @I	t.
18. I hereby certify that the foregoing is true and correct SIGNED TITLE Area Supt. DATE	8-17-78	
Dale R. Crockett (This space for Federal or State office use)		_

APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

JAMES F. SIMS DISTRICT ENGINEER