

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

SUNDRY NOTICES AND REPORTS ON WELLS
DO NOT USE THIS FORM FOR NOTICES TO: 1. WELL TO BE CLOSED OR PLUGGED IN TO A DIFFERENT RESERVOIR.
(SEE APPLICATION FOR PERMIT TO STOP PRODUCTION FOR SUCH PURPOSES.)

1. ☐ OIL WELL ☐ GAS WELL ☐ OTHER- Injection Well

2. Name of Operator
Getty Oil Company

3. Address of Operator
P. O. Box 730, Hobbs, New Mexico 88240

4. Location of Well

UNIT LETTER B 660 FEET FROM THE North LINE AND 1980 FEET FROM
THE EAST LINE, SECTION 32 TOWNSHIP 24S RANGE 38E NMPAR.

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.
B-9613

7. Unit Agreement Name
West Dollarhide Drk. Un

6. Farm or Lease Name
West Dollarhide Drk. Un

9. Well No.
43

10. Field and Pool, or Wildcat
Dollarhide Tubb-Drinkard

12. County
Lea

15. Elevation (Show whether DF, RT, GR, etc.)
3220' OF

16. Check Appropriate Box To Indicate N
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER Recement casing ☒

0+2 (P.O. BOX 1980
HOBBS, N.M. 88240 (LEA COUNTY))

1-R.J. STARRAK-TULSA
1-A.B. CARY-MIDLAND
1-E. Buttress, ENGINEER
1-C. Kingston, FOREMAN - West Dollarhide Drinkard Unit
1-FILE
1- WIO's -LIST ATTACHED
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) SEE RULE 1103.

1. Rig up pulling unit.
2. Pull tubing and packer and install BOP.
3. Run retrievable BP to approximately 6000'. Test BP and casing to 1000 psi.
4. Spot 10' of sand on top of BP.
5. Run cement bond log 6000' to surface.
6. Perforate and cement squeeze intervals not adequately cemented.
7. WOC 24 hrs.
8. Drill out cement and test casing to 1000 psi.
9. Wash sand off BP and retrieve.
10. Run packer and tubing and place well back on injection.

THE COMMISSION MUST BE NOTIFIED
24 HOURS PRIOR TO COMMENCING WORK

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED [Signature] TITLE Area Superintendent DATE 8-17-78

APPROVED BY Jerry Sauton TITLE Dist. 1, Supv. DATE AUG 21 1978

CONDITIONS OF APPROVAL, IF Dist. 1, Supv.