

Form 9-331
Dec. 1973UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYN. H. ...
P. O. Box ...Form Approved.
Budget Bureau No. 42-R1424

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 Company3. ADDRESS OF OPERATOR
P.O. Box 730 Hobbs, NM 882404. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: Unit ltr. K, 1980 FSL & 1980 FWL
AT TOP PROD. INTERVAL: Sec. 21-25S-36E
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) ☐☐
☐
☐
☐
☐
☐
☐
☐5. LEASE
NM-93429

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
West Jal "A"9. WELL NO.
110. FIELD OR WILDCAT NAME
Undesignated11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 21-25S-36E12. COUNTY OR PARISH
Lea13. STATE
NM

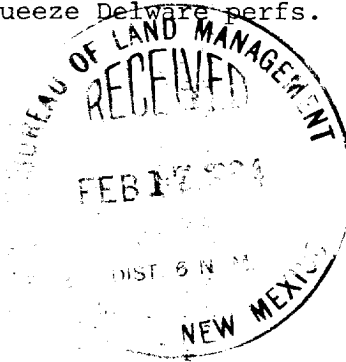
14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3095' DF

(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 and install BOP.
2. Pull rods and tubing, set RBP @ + 7450 and proceed to squeeze Delaware perfs.
3. Drill out and test Delaware to 1000 psi.
4. Drill out plugs to TD 12,150'.
5. Run 5" liner and cement.
6. Drill out liner and run GR-cement bond log.
7. Perforate Lower Penn selectively 11,300-12,125'.
8. Stimulate if necessary.
9. Place well on production.



Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Dele R. Crockett TITLE Area Superintendent DATE February 15, 1984

APPROVED

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

MAR 28 1981

*See Instructions on Reverse Side

RECEIVED

APR 2 - 1984

O.C.D.
HOBBS OFFICE