

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-76

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SANTA FE	
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U.S.G.S.	
LAND OFFICE	
OPERATOR	

0+2-NMOCD-Hobbs

1-Laura Richardson-
Midland

1-File

1-JA 1-BW

1-Engr. RH & DW

1-CP 1-CB

3a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Injection Well	7. Unit Agreement Name Cooper Jal Unit
2. Name of Operator Getty Oil Company	8. Farm or Lease Name Cooper Jal Unit
3. Address of Operator P.O. Box 730 Hobbs, NM 88240	9. Well No. 137
4. Location of Well UNIT LETTER D 990 FEET FROM THE North LINE AND 330 FEET FROM THE West LINE, SECTION 25 TOWNSHIP 24S RANGE 36E NMPM.	10. Field and Pool, or Wildcat Jalmat
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	

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.

Cooper Jal Unit #137 became NIO due to direct channeling well well #138. Shut off test and injection profiles are in order to verify direct channeling.

A three month extension for temporary abandonment status is requested to evaluate this well for running a liner to isolate and return well to injection.

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

SIGNED Dennis B. Wehner TITLE Area Superintendent DATE 9-15-82
for Dale R. Crockett

ORIGINAL SIGNED BY

APPROVED BY JERRY SEXTON

TITLE _____

DATE _____

CONDITIONS OF APPROVAL _____

SEP 20 1982