

N. M. OIL CONS. COMMISSION

P. O. BOX 180

HOBBS, NEW MEXICO 88240

0+5-MMS-Roswell, 1-File, 1-Engr. JDM, 1-Foreman BI,

Form 9-331
Dec. 1973Form Approved.
Budget Bureau No. 42-R1424UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill, deepen or plug back on a different reservoir. Use Form 9-331-C for such proposals.)

1. oil well ☒ gas well ☐ other ☐

AUG 19 1982

2. NAME OF OPERATOR
Getty Oil Company

OIL & GAS

3. ADDRESS OF OPERATOR

P.O. Box 730 Hobbs, NM 88240

MINERALS MGMT. SERVICE
ROSWELL, NEW MEXICO4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) Unit 1tr. L, 1980' FSL & 330' FWL,
AT SURFACE: Sec. 5-24S-37E
AT TOP PROD. INTERVAL:
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) Deepen & run liner ☒

5. LEASE

NM-7488

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Myers Langlie Mattix Unit

8. FARM OR LEASE NAME

Myers Langlie Mattix Unit

9. WELL NO.

170

10. FIELD OR WILDCAT NAME

Langlie Mattix

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec 5 T24S, R37E

12. COUNTY OR PARISH

Lea

13. STATE

NM

14. API NO.

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

(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. Install BOP.
2. Run production log.
3. TOH with rods and tubing.
4. Deepen with lease water to \pm 3810'.
5. Run CNL Log 3810-3300'.
6. Run 500' 4" 9.5# FL-45 K-55 liner 3810-3310' and cement.
7. WOC 24 hours.
8. Drill out w/3 1/4" bit to \pm 3770'.
9. Perf based on electric logs.
10. Acidize under packer.
11. Test.
12. Frac if necessary.
13. Place back on production

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

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

SIGNED

Dale R. Crockett

TITLE

Area Superintendent

DATE

August 18, 1982

APPROVED

(This space for Federal or State office use)

APPROVED BY

(Signature) JAMES A. GILLHAM

DATE

CONDITIONS OF APPROVAL, IF ANY:

AUG 20 1982

FOR

JAMES A. GILLHAM
DISTRICT SUPERVISOR

See Instructions on Reverse Side

RECEIVED

AUG 23 1982

O.C.D.
HOSBS OFFICE