N. M. OIL CONS. COMMISSION P. O. BOX 1980

HOBBS, NEW MEXICO 88240 Form Approved. Form 9-331 Budget Bureau No. 42-R1424 Dec. 1973 UNITED STATES 5. LEASE NM-7488 0+5-MMS-Roswell DEPARTMENT OF THE INTERIOR 1-File 6. IF INDIAN, ALLOTTEE OR TRIBE NAME **GEOLOGICAL SURVEY** 1-Engr. JDM 1-JA l-Foreman BI I-Laura 7. UNIT AGREEMENT NAME SUNDRY NOTICES AND REPORTS ON WELLS Myers Langlie Mattix Unit Midland (Do not use this form for proposals to drill or reservoir. Use Form 9-331-C for such proposals 8. FARM OR LEASE NAME Myers Lanal SEP 3 0 1982 oil 9./WELL NO. X other well well 183 --2. NAME OF OPERATOR OIL & GAS 200 S U.S. GEOLOGICAL SURVEY 10. FIELD OR WILDCAT NAME Getty Oil Company Langlie Mattix 📜 3. ADDRESS OF OPERATOR 11. SEC., T., R., M., OR BLK. AND SURVEY OR Box 730, Hobbs, New Mexico 38240 P.O. AREA 4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17 Sec. 45 T-24S, 3R-37E below.) Unit Ltr. 0, 660' FWL & 1980' FEI 12. COUNTY OR PARISH 13. STATE AT SURFACE: NM Lea 8 AT TOP PROD. INTERVAL: 10141 1 10141 1 AT TOTAL DEPTH: 14. API NO. 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3284. GL SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: cement of A toxorer of sixe. TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE (NOTE: Report results of multiple completion or zone REPAIR WELL secapted secapted operations change on Form 9-330.) PULL OR ALTER CASING 불리아불 MULTIPLE COMPLETE **CHANGE ZONES** ABANDON* Casing Connection (other) 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.)* Services Ser 5 1/2" OD casing brought to surface = 3 8 5/8" OD Riser on casing brought to surface. and Riser on surface casing brought to and Riser on Inspected by Ron Castleberry on 40 6 6 6 Inspected by Nathan E. Clegg on Inspected by Tony Plattsmier on 有質素を有 9/28/82 Inspected by E.W. Seay on Inspected by Otto Wink on Set @ Subsurface Safety Valve: Manu. and Type _ 18. I hereby certify that the foregoing is true and correct September 29, 1982 TITLE Area Superintendemate ACCEPTED FOR RECORPHIS space for Federal or State office use) PETER W. CHESTER DATE APPROVED BY Contain Strong CONDITIONS OF APPROVAL, IF ANY:

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OCT 3 1983

HOBBS OFFICE