

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on re-
verse side)

Budget Bureau No. 1004-D133
Expires August 31, 1985

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" for such proposals.)

6. LEASE DESIGNATION AND SERIAL NO.
LC 032545-A

7. IF NEAR, ELUCIDATE ON TRAIL NAME

7. SURVEY AGREEMENT NAME
myers Langlie Mathis Unit

8. FARM OR LAND NAME

9. WELL NO.
252

10. FIELD AND POOL, OR WILDCAT
Langlie Mathis (7-Riv, Qn)

11. SEC. T. R. M. OR BLK. AND
SUBST. OR AREA

sec 31, T23S R37E

12. COUNTY OR PARISH
Lea

13. STATE
N.M.

1. OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR
Texaco Producing Inc

3. ADDRESS OF OPERATOR
P.O. Box 1060 Eunice, N.M. 88231

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

Unit letter P 685 FSL and 660 FEL

14. PERMIT NO.
3312.1 GR

15. ELEVATIONS (Show whether DT, RT, CR, etc.)

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PELL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

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 perti-
nent to this work.)

5/20/87 MIRU PU. TIH with 4 7/4" bit on 2 7/8" workstring and tagged at 3737'. TOH with
workstring and bit. TIH with open ended workstring to 3679'.

5/21/87 Ran GR-CCL and interface test.

5/22/87 Treated well with 8820 gallons of Injectrol G (Halliburton) down tubing.

5/26/87 TOH with workstring, TIH with cmt retainer to 3679'. Could not pump into retainer.
TOH with workstring.

TIH with 2 7/8" production tubing, rods and pump to 3643'. Returned to
production

6/4/87 Tested 21 BOPD, 193 BWPD, GOR 143

RECEIVED

NOV 27 1987

SJS

NOV 23 8 23 AM '87
CADDILLAC COUNTY
AREA SUPERINTENDENT

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

SIGNATURE

TITLE

AREA SUPERINTENDENT

DATE

NOV 18 1987

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY

*See Instructions on Reverse Side