

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

3a. Indicate Type of Lease  
State  Fee   
3. 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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name LANGLIE-JAL UNIT
2. Name of Operator UNION TEXAS PETROLEUM CORPORATION	8. Farm or Lease Name
3. Address of Operator P.O. BOX 2120, HOUSTON, TEXAS 77252-2120	9. Well No. 97
4. Location of Well UNIT LETTER <u>P</u> <u>140</u> FEET FROM THE <u>SOUTH</u> LINE AND <u>1200</u> FEET FROM THE <u>EAST</u> LINE. SECTION <u>32</u> TOWNSHIP <u>24-S</u> ( ) RANGE <u>37-E</u> N.M.P.M.	10. Field and Pool, or Whichever LANGLIE-MATTIX (QUEEN) <sup>SR</sup> <sub>A</sub> <sup>GB</sup>
15. Elevation (Show whether DF, RT, GR, etc.) 3250' GR	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 OPUS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <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.

GENERAL PROCEDURE

1. POH W/RODS & PMP, RELEASE TBG ANCHOR & INSTALL BOP.
2. POH W/PRODUCTION STRING.
3. GIH W/CIBP ON PRODUCTION STRING & SET CIBP APPROX 50' ABOVE TOP PERFS.
4. PRESSURE TEST CASING TO 300 PSIG SURFACE PRESSURE.
5. REVERSE CIRCULATE ONE ANNULAR PLUS TBG VOLUME OF INHIBITED\*\* PACKER FLUID.
6. POH W/PRODUCTION TBG & MAKE SURE HOLE IS LOADED W/PACKER FLUID\*\*.
7. REMOVE BOP & INSTALL WELLHEAD W/TAPPED BULL PLUG, NEEDLE VALVE, & PRESSURE GAUGE ADAPTER.

\*\*FLUID SPECIFICATIONS

20 GAL OF UNICHEM TH-606 PER 100 BBL OF FRESH WATER.

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

SUED Jerry White TITLE REGULATORY PERMIT COORDINATOR DATE 08/03/88

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

POWERED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE AUG 08 '88

CONDITIONS OF APPROVAL, IF ANY: