

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT**

FORM APPROVED  
OMB No. 1004-0135  
Expires November 30, 2000

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.*

5. Lease Serial No.  
IC-032511A

6. If Indian, Allottee or Tribe Name

7. If Unit or CAJ Agreement, Name and/or No.  
LANGLIE JAL UNIT

8. Well Name and No.  
LANGLIE JAL UNIT 83

9. API Well No.  
30-025-11513

10. Field and Pool, or Exploratory Area  
LANGLIE MATTIX

11. County or Parish, State  
LEA COUNTY, NM

**SUBMIT IN TRIPLICATE - Other Instructions on reverse side**

1. Type of Well  
 Oil Well  Gas Well  Other WATER INJECTION WELL

2. Name of Operator  
KENSON OPERATING COMPANY INC

3a. Address  
P O BOX 3531, MIDLAND TX 79702

3b. Phone No. (include area code)  
915/685.0878

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
1980' FSL & 660' FWL Sec. 9 T25S R37E UL L

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

| TYPE OF SUBMISSION                                   | TYPE OF ACTION                                |   |  |   |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize              | <input type="checkbox"/> Deepen           | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off                     |
| <input type="checkbox"/> Subsequent Report           | <input type="checkbox"/> Alter Casing         | <input type="checkbox"/> Fracture Treat   | <input type="checkbox"/> Reclamation               | <input type="checkbox"/> Well Integrity                     |
| <input type="checkbox"/> Final Abandonment Notice    | <input type="checkbox"/> Casing Repair        | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete                | <input checked="" type="checkbox"/> Other <u>REACTIVATE</u> |
|  | <input type="checkbox"/> Change Plans         | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon       |   |
|  | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back        | <input type="checkbox"/> Water Disposal            |   |

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

MI & RU April 2002. TOH with downhole equipment.  
Repair if necessary.  
Restore well to water injection.

BEFORE EXAMINER  
OIL CONSERVATION DIVISION  
OCD EXHIBIT NO: 99  
CASE NO: 12758-A

RECEIVED  
HOBBS  
OCD

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

Name (Printed/Typed) M. A. Sirgo, III Title Engineer

Signature [Signature] Date October 26, 2001

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon. Office \_\_\_\_\_