	n 9–331 1y 1963)	U	STATES	SUBMIT IN TRIPLIC	E+	Form approve	d.	
		DEPARTME	N' JF THE INTERI	OR (Other Instructions verse side)	re-	5. LEASE DESIGNATION	u No. 42-R1424.	
		GEO	DLOGICAL SURVEY			LC 030187		
						6. IF INDIAN, ALLOTTEE	OR TRIBE NAME	
			S AND REPORTS C		ļ			
	(Do not use this	Use "APPLICATIC	to drill or to deepen or plug b N FOR PERMIT—" for such pr	ack to a different reservoir. poposals.)				
<u>1.</u>	<u> </u>				<u>n</u> - -	7. UNIT AGREEMENT NA	ME	
	OIL GAS WELL X WELL	OTHER		MEREV				
	NAME OF OPERATOR		12	IR IL WIE		8. FARM OR LEASE NAM	 E	
	$c_{11}f_{01}$	l Corporatio		UU	.	LaMunyon "B"	Fodoral	
3.	ADDRESS OF OPERATOR			MAY 5 Parts		9. WELL NO.	reuerar	
	POR	ov 670 Hobb	s, NM 88240	U.S. GEOLOGICAL SU	RVA.	(2		
4.	LOCATION OF WELL (R See also space 17 belo	eport location clear		10. FIELD AND POOL, OF	WILDCAT			
	See also space 17 belo At surface	ow.)	1	Innalia Mattix				
		c 10001 PF	T Coo 22 TO2C D2	7 5	ŀ	Langlie Matti 11. SEC., T., R., M., OR B		
	000 F51	L & 1900 FE	L, Sec 22, T23S-R3	/ E		SURVEY OR AREA		
					İ	ດ	0 7777	
14.	PERMIT NO.		5. ELEVATIONS (Show whether DF,	BT. GB. etc.)		Sec 22, T23S-R. 12. COUNTY OF PARISH	J/E .	
			•••••••			-		
		I				Lea	NM	
16.	Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data							
	N	OTICE OF INTENTION	т о:	SCBS	SEQUE	NT REPORT OF:	F :	
			OR ALTER CASING	WATER SHUT-OFF		REPAIRING W		
	TEST WATER SHUT-OF	[·····]		FRACTURE TREATMENT			11	
	FRACTURE TREAT		DON*	SHOOTING OR ACIDIZING		ALTERING. CA		
	SHOOT OR ACIDIZE	11			LJ	ALANDON MEN		
	REFAIR WELL		GE PLANS	(Other) (Note: Report resu	ults o	f multiple completion e	on Well	
	(Other) (On	<u>р. Нва.</u>		Completion or Reco details, and give pertinent da		ion Report and Log for		
11.	proposed work. If	well is directionally	drilled, give subsurface location	ions and measured and true ver	rtical	depths for all markers	and zones perti-	
	nent to this work.) *							
						1		
				by Gulf on 1-1-77				
	closed in	n to this da	te. Poor conditio	n of the surface pr	rod	ucing equipmen	t	
	and the o	depleted nat	ure of the Langlie	Mattix zone around	d t	his wellbore		
	are respo	onsible for	the closed in stat	us. At present a s	stu	dy is under wa	y	
	to deterr	mine the fea	sibility of recomp	letion, secondary m	rec	overy, or disp	osal	
	of the p							
	-						-	
		_						
	-	2-44 This	approval of tempora	ry				
	0	 fa	andonment expires	1-1-79		. *		

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the summer of the state state of the

I hereby certify that the foregoing is true and co SIGNED	rrect Area Engineer	DATE 4-28-78
(This space for Federal or State office use)		an a
APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANX:		C. G. J. MAY 8 1278
	*See Instructions on Reverse Side	A S. AUCHRATCAL SUIVER HODAS, ANY MANOR

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