Form 9–331	UNITED STATES	SUBMIT IN TRIPLICATE	Form approved. Budget Bureau No. 42-R1424.
(May 1963)	DEPARTMENT OF THE INTER	RIOR (Other instructions on re	5. LEASE DESIGNATION AND SERIAL NO.
GEOLOGICAL SURVEY			LC-060825 B
SUND (Do not use this fo	RY NOTICES AND REPORTS rm for proposals to drill or to deepen or plug Jse "APPLICATION FOR PERMIT—" for such	ON WELLS s back to a different reservoir. proposals.)	6. It INDIAN, ALLOHEE OR TAISE SAME
1.			7. UNIT AGREEMENT NAME
OIL GAS WE'LL OTHER Water Injection Well 2. NAME OF OPERATOR			Myers Langlie Mattix Uni
Getty Oil Company			Myers Langlie Mattix Uni
3. ADDRESS OF OPERATOR			9. WELL NO.
P. O. Box 730, Hobbs, New Mexico 88240 4. Location of Well (Report location clearly and in accordance with any State requirements. See also space 17 below.)			85 10. FIELD AND POOL, OR WILDCAT Langlie Mattix
// /			Sec. 34 - 23S - 37E
14. PERMIT NO.	15. ELEVATIONS (Show whether		Lea New Mexico
16.	Check Appropriate Box To Indicate		
NO	OTICE OF INTENTION TO:	SCBSI	QUENT REPORT OF:
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING ABANDONMENT*
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONABNI
REPAIR WELL	to Water Injection X	(Other) (Note: Report resu	its of multiple completion on Well appletion Report and Log form.)
	2 60 114662 2-3011		or including estimated date of starting any
17. DESCRIBE PROPOSED OR proposed work. If nent to this work.) *	COMPLETED OPERATIONS (Clearly state all perti- well is directionally drilled, give subsurface	ocations and measured and true ver	ilcal depths for all markers and zones peru-
(2) Pull rods (3) Install I (4) Clean out	olling unit. Is and pump. BOP and pull tubing. It to TD. It to 2 3/8 tubing to with annulus with inhibited wat	in 100' of top perfor er and set packer.	ation.
SEE AT	TACHED FOR IS OF APPROVAL		
(A1 EV	-460		·
18. I hereby certify that	inal Signed By	Area Superintendent	DATE 6-23-78
	R. Crocaett		APPROVED
(This space for Fede	eral or State office use)		A MY A NAME OF THE PARTY OF THE

*See Instructions on Reverse Side

TITLE _

JUL 26 1978 *Q-Q-X*. CTING DISTRICT ENGINEER