November 1983) Formerly 9-331)	UNITED S DEPARTMENT F	THE INTERIO	SUBMIT IN TRIPLICA (Other instructions overse side)	LAPITES AUG	eau No. 1004-0135 gust 31, 1985	
	BUREAU OF LAND ON THE STATE OF	REPORTS O	N WELLS ck to a different reservoir.	NMNM0569	TTEE OR TRIBE NAME	
OIL X GAS				7. UNIT AGREEMENT	' NAME	
2. NAME OF OPERATOR				<u>API# 30-025-</u>	API# 30-025-21616	
Fina Oil & Chemical Company				8. FARM OR LEASE	8. FARM OR LEASE NAME	
3. ADDRESS OF OPERATOR P.O. Box 10887, Midland, TX 79702-0887				Ginsberg Fe	Ginsberg Federal. 9. Wall No.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*				13	10. FIELD AND POOL, OR WILDCAT	
At surface	ł					
Unit K, 1980 FSL, 1650 FWL				11. SEC., T., R., M., O	Langlie Mattix - 7R-Q-GF 11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA	
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)				Sec. 31 - 2	5S-38E	
3050 KB				12. COUNTY OR PARI	SH 13. STATE	
16.			(1)	Lea	NM	
•	HOTICE OF INTENTION TO:	. To indicate Mai	ure of Notice, Report, o			
TEST WATER SHUT-01	PULL OR ALTER C	VELYO TO		SEQUENT REPORT OF:		
FRACTURE TREAT	MELTIPLE COMPLE	i	WATER SHUT-OFF FRACTURE TREATMENT	BEPAIRING		
SHOOT OR ACIDIZE	ABANDON*		SHOOTING OR ACIDIZING	ALTERING ABANDON M	I—I	
REPAIR WELL (Other)	CHANGE PLANS		(Other) Well Star	tus		
17 LESCHIPE PROPERTY	COMPLETED OPERATIONS (Clearly well is directionally drilled, give	State all pertinent d		alts of multiple completion multiple and Log i		
In 2/85, Blinebry. Th	Tenneco (former ope Langlie Mattix (Pen Tenneco filed a Sun is work was never de	dry Notice to	o pull the RBP and	was then put ba	eck on prod- Penrose &	
Ine curre Langlie Mattix	nt status of this we (Penrose); with a l	ell is: Pump	oing oil well; pro	ducing thru tub	ing from the	
	, ,=	WE 365 6 14.	•		C) C)	
					-	
			ACCEPTE		· ·	
			I Loca			
			OCT 2			
			CARLESAD, NEW	MEXICO	-	
8. I hereby certify that the	ne paregoing is true and correct					
SIGNED Neva H	erndon den	TITLE Petro	technical Associat	e DATE 10/4	./93	
(This space for Federal	or State office use)					
APPROVED BYCONDITIONS OF APP	ROVAL IN ANY.	TITLE		DATE		
W	WOYAL, IF ANI:					
AV	•					
1014193	*Se	e Instructions on	Reverse Side			

*See Instructions on Reverse Side