NO. OF COPIES RECEIVED	٦		Form C-103
DISTRIBUTION		Supersedes Old C-102 and C-103	
SANTA FE NEW MEXICO OIL CONSERVATION COMMISSION			Effective 1-1-65
FILE	_		5a. Indicate Type of Lease
U.S.G.S.	4		State Fee V
LAND OFFICE	4		5. State Oil & Gas Lease No.
OPERATOR			
SUND			
OIL GAS WELL MELL	Langle Jack Unit		
2. Name of Operator	Langlie Jack Unit		
3. Address of Operator P. O. Box 4	9. Well No. 2		
4. Location of Well UNIT LETTER	FROM Langie Matrix 7 RVIS Queen		
THE East LINE, SEC	MPM.		
	15. Elevation (Show whether	DF, RT, GR, etc.)	12. County
18. Check	Appropriate Box To Indicate N		
NOTICE OF	INTENTION TO:	ŞUBSEQU	JENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CABING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUS AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOS	, —
07455		OTHER	
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 1705.			
This well was TA'd on 11/27/85 with the following:			
a. Set CIBP @ 3150			
b. Spotted 7 sxs class "c" neat on top of CIBP			
c. Spotted a 100' cmt plug from 2540'-2640' (plug = 13 sxs Class' c' neat			
d. Set a retainer @ 400° and pumped 250 sxs class c cmt. below.			
c. Spotted a 100' cmt plug from 2540'-2640' (plug = 13 sxs class "c" neat) d. Set a retainer @ 400' and pumped 250 sxs class "c" cmt. below. Circulated to Surface (holes in casing between 469-815'			
C, Kigged down on 11/27/85			
This well will be permanently abandoned by spotting an 80' cmt plug to surface (plug = 10 sxs class' c" neat)			
to surface (plug = 10 5x5 Class C"	neat)	
(3) Casing will	be cut off 3' below will be erected.	w tinal restored	ground level and a
	r will be elected.		
(3) kig down			
18. I hereby certify that the informat	ion above is true and complete to the best	of my knowledge and belief.	
SIGNED Corp	THE TITLE	Administrative Supervisor	DATE /-27-86
• • • • • • • • • • • • • • • • • • • •	BY JERRY SEXTON SUPERVISOR		PATE FEB 4 - 1986
APPROVED BY			.11 /\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
CONDITIONS OF APPROVAL, IF A	N.		Nmoco-Hobbe(3) F

HORRES JANCE

JAN 29 1986