

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of Well  
☐ Oil Well ☐ Gas Well ☒ Other Injection Well

2. Name of Operator  
Betwell Oil & Gas Company

3. Address and Telephone No.  
PO Box 2577, Hialeah, FL 33012; 915-620-6042

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
N 660' FSL; 1980 FWL  
Sec 27; Township 24S; Range 37E

5. Lease Designation and Serial No.

8910082510 Fee

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

Langlie Mattix  
Woolworth Unit

8. Well Name and No.

LMWU 604

9. API Well No.

30-025-11250

10. Field and Pool, or Exploratory Area

Langlie Mattix 7 River

11. County or Parish, State Q Grayburg

Lea, NM

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

TYPE OF SUBMISSION

- ☒ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- |   |  |
|---|--|
| <input type="checkbox"/> Abandonment              | <input type="checkbox"/> Change of Plans         |
| <input type="checkbox"/> Recompletion             | <input type="checkbox"/> New Construction        |
| <input type="checkbox"/> Plugging Back            | <input type="checkbox"/> Non-Routine Fracturing  |
| <input checked="" type="checkbox"/> Casing Repair | <input type="checkbox"/> Water Shut-Off          |
| <input type="checkbox"/> Altering Casing          | <input type="checkbox"/> Conversion to Injection |
| <input type="checkbox"/> Other _____              | <input type="checkbox"/> Dispose Water           |

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

- Run in hole; set Bridge Plug above perfs;
- Isolate casing leak; squeeze cement to circulate to surface if possible;
- Drill out and test

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

Signed [Signature] Title Agent Date 4/18/01

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Conditions of approval, if any: