Form 9–331 Dec. 1973	Form Approved.
UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	LC 032 326 A
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas	LANGLIE JACK UNIT
well Well other /NJ.	9. WELL NO.
2. NAME OF OPERATOR CONOCO INC.	10. FIELD OR WILDCAT NAME
3 ADDRESS OF OPERATOR	LANGLIE MATTIX 7 RURS QN.
P. O. Box 460, Hobbs, N.M. 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA
below.) AT SURFACE: 330'FNL & 330'FEL	SEC. 29 7-245 R-37 E 12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL:	LEA WM
AT TOTAL DEPTH:	14. API NO. 15 15 15 15 15 15 15 15 15 15 15 15 15
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
FRACTURE TREAT	
REPAIR WELL	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	
CHANGE ZONES	
ABANDON*	3 4000
(other) csq. leak survey	선생 생활 성 1980 등 공연성생 등
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dimeasured and true vertical depths for all markers and zones pertinen	all pestinent details, and give pertinent dates, rectionally drilled, give subsurface locations and to this works.
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Usy. leak survey performed on subject well 8/6/80, with valves being	The second state of the se
and up a ragged at surface.	
Survey witnessed by Tony Platts mier of MATTATA FOR RECORD	
Plattsmier of MACCEPTED FOR RECORD	
AUO 0 5 1000	그 시 시 시 시 시 시 시 시 시 시 시 시 시 시 시 시 시 시 시
AUG 2 5 1980	
U.S. GEOLOGICAL SURVEY	
Subsurface Safety Valve: Manu. and Type	
	Set @Ft.
18. I hereby certify that the foregoing is true and correct	
SIGNED WILL - State Field TITLE Admin. Supervisor DATE 8/20/80	
(This space for Federal or State office use)	
APPROVED BY TITLE	DATE <u> </u>
CONDITIONS OF APPROVAL, IF ANY:	ရှိသည် မိုက်က မြောက်သည် မိုက် မြောက်သည် မိုက်က မြောက်သည် မြောက် မြောက်သည် မိုက်က မြောက်သည် မြောက်
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