

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN REVERSE SIDE
(Other instructions on reverse side)

Form approved,
Budget Bureau No. 1004-1
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER (Water Injection Well)

2. NAME OF OPERATOR
UNION TEXAS PETROLEUM CORPORATION

3. ADDRESS OF OPERATOR
P.O. Box 2120, Houston, TX 77252-2120

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

Unit Letter "L" 1980' FSL & 660' FWL

14. PERMIT NO. 30-025-11305

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3245' GR

5. LEASE DESIGNATION AND SERIAL
NM 12610

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Langlie Jal Unit

8. FARM OR LEASE NAME

9. WELL NO.
15

10. FIELD AND POOL OR WILDCAT
Langlie Mattix (Queen)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 3 T-24-S, R-37E

12. COUNTY OR PARISH
Lea

13. STATE
NM

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

16. NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Mechanical Integrity Test <input checked="" type="checkbox"/>	XX

(Other) ☐

17. 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.)

Packer set @ 3382' on 9/83. Csg. circ. with inhibited fluid. Test to 500 psi on 5/23/91. Held OK. Request T&A status.

RECEIVED
JUN 10 8 52 AM '91
CARLSBAD OFFICE
AREA HEADQUARTERS

APPROVED FOR 12 MONTH PERIOD

FINDING 5-31-92

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

SIGNED Red White

TITLE Reg. Permit Coordinator

DATE 6/6/91

(This space for Federal or State office use)
Orig. signed by Red White

PETROLEUM SECTION

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE 7-2-91

Subject to
Like Approval
by State

*See Instructions on Reverse Side

J B R

RECEIVED

JUL 09 1991

CS
HOAMS OFFICE