	<u></u>	N. M. OIL CONS. COMMIS			
Form 9-331 - May 1963 -	UNITE. STATES	P. O.SBOMT GRATRIPLICA'	Form appr re-Budget Bi	reau No. 42-R1424.	
DEPART	MENT OF THE INTERI	COPBESSENEW MEXICO &	-LC - 0	on and serial No. $52956$	
SUNDRY NO	TICES AND REPORTS ( osals to drill or to deepen or plug b CATION FOR PERMIT—" for such p	ON WELLS ack to a different reservoir.	6. IF INDIAN, ALLOI	TEE OR TRIBE NAME	
	ATION FOR FERMIT— for such p.	() posais, /	7. UNIT AGREEMENT	NAME	
GIL     GAS     WELL     WELL     WATER     Water Injection			Langlie-Jal unit		
2. NAME OF OPERATOR	Corporation		8. FARM OR LEASE	NAME	
Union Texas Petroleum Corporation 3. ADDRESS OF OPERATOR			9. WELL NO.	9. WELL NO.	
1300 Wilco Building Midland, Texas 79701			44		
4. LOCATION OF WELL Report location clearly and in accordance with any State requirements.* See also space 17 below.)			10. FIELD AND POOL, OR WILDCAT		
At surface 2310' FNL & 990" FWL			Langlie Mattix 11. sec., T., R., M., OR BLK. AND		
Sec. 4, T-25-	S, R-37-E		SURVEY OR A	BEA	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF	, RT, GR, etc.)	12. COUNTY OF PAR	ISH 13. STATE	
	3218 GL		Lea	N.M.	
16. Check A	Appropriate Box To Indicate N	lature of Notice, Report, o	r Other Data		
NOTICE OF INTI	ENTION TO:	SUBS	SEQUENT REPORT OF:		
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRI	G WELL	
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERIN	G CASING	
SHOOT OF ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDON	MENT*	
(Other) Convert to Wat	er Injection XX	(Other) (Note: Report rest	ults of multiple complet ompletion Report and Log	on on Well	
17 CHARTER ARE MAREE OR COMPLETED O		t details and give pertinent da	tes, including estimated	date of starting any	
1. Move in and rig u	p service unit.				
	•				
2. Pull rods and tub					
	asing scraper and cle				
-	ons with 3000 gallons	of / ½% iron seque	estered acid.		
5. Swab acid off per	forations.				
6. Run IPC tubing an above top perfora	d Guiberson Uni-Pack tion.	er IV or equivalent	and set 50' <u>+</u>	SEP	
7. Connect well up f	or injection	•			
8. Commence injectio	on not to exceed 800 p	si/day.		GEIVE	
9. When well stabili	zes run injection pro	file.		ED AN 83	
15. I hereby certify that the foregoing	; is true and corre <b>ct</b>				
SIGNED Koren 7.	aday TITLE Pr	oduction Analyst	DATE	15-83	
This space for Federal or State of	office use)				
APPROVED BY	TITLE		DATE	ED FOR RECORD	
CONDITIONS OF APPROVAL, IF			$\mathcal{J}$		
			S	P 1 9 1983	

\*See Instructions on Reverse Side

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