

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Form approved.  
Budget Bureau No. 1004-0135  
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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. LC-055546
2. NAME OF OPERATOR UNION TEXAS PETROLEUM CORPORATION		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 4000 N. Big Spring, Ste. 500, Midland, TX 79705		7. UNIT AGREEMENT NAME Langlie Jal Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit Letter "K", 1980' FSL & 1980' FWL		8. FARM OR LEASE NAME
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, OR, etc.) 3218.5' DF	9. WELL NO. 58
		10. FIELD AND POOL, OR WILDCAT Langlie Mattix (Queen) - GB
		11. SEC., T., R., M., OR B.M. AND SURVEY OR AREA Sec. 5, T25S, R37E
		12. COUNTY OR PARISH Lea
		13. STATE New Mexico

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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 COMPLETION <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) Perf. & Acidize <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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.)\*

1. MIRU - Pulled rods & pump.
2. Clean out to 3696'.
3. Perf. Lower Queen 3659-3691' - 8 holes total - 2 SPF.
4. Acidize w/1200 gal. 7.5% HCL.
5. Spot 300 gal. 7.5% HCL to pkr. @ 3689'.
6. Perf. Upper Queen 3204-3388' - 88 holes total.
7. Acidize w/4000 gal. 7.5% HCL.
8. Ran prod. equipment & PWOP.

ACCEPTED FOR RECORD

MAY 14 1987

SJS  
CARLSBAD, NEW MEXICO

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

SIGNED [Signature] TITLE Reg. Permit Coord. DATE 5-11-87

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side