

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. OIL CONS. COMMISSION  
P.O. BOX 1980  
MORRIS, NEW MEXICO 88240

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

2. Name of Operator

GP II Energy, Inc.

3. Address and Telephone No.

P. O. Box 50682 - Midland, Tx. 79710 915-684-4748

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Unit Letter C: 660 feet from the N Line and 1919.6 feet from the W Line: Section 6: Township 25S: Range 37E: NMPM

5. Lease Designation and Serial No.

8910115870

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Langlie Jal #32

9. API Well No.

30-025-11481

10. Field and Pool, or Exploratory Area

Langlie Mattix

11. County or Parish, State

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

- ☐ Abandonment  
☒ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☐ Other  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ 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.)\*

1. MIRU on or about September 15, 1995 and trip existing production equipment.
2. Selectively perforate additional unit pay from 3030' to 3330'.
3. Stimulate new perforations.
4. Return to production.

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

Signed

Title President

Date 8-24-95

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

