(May 1963) DEPARTMENT OF THE INTERIOR (Other fustractions on a G LOGICAL SURVEY				Federal - 032511-E 6. IF INDIAN, ALLOTTEE OF THESE NAME	
SUND (Do not use this fo	RY NOTICES AND RE	PORTS O	N WELLS ek to a different reservoir.	6. IF INDIAN, ALCOITED OF THIS MAN	
1.				7. UNIT AGREEMENT NAME	
OIL CAS WELL OTHER				Langlie-Jal Unit	
2. NAME OF OPELATOR					
UNION TEXAS PETROLEUM CORPORATION				U WELL NO.	
1300 Wilco Building, Midland, Texas 79701				78	
4. LOCATON OF WELL (Report location clearly and is accordance with any State regulated ofts.) See also space 17 below.) At surface				Langlie-Mattix (Queen)	
				11. SEC., T., B., M., OR BLS, AND	
				SURVEY OR ARMA	
Unit Letter "G", 1650' FNL & 1650' FEL				Sec. 8, T-25-S, R-37-E	
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, ET, CR, etc.)				12. COUNTY OR PARISH 13. STATE	
				Lea New Mexic	
16.	Check Appropriate Box To	Indicate Na	iture of Notice, Report, or	Other Data	
	TICE OF INTENTION TO:		SUBSE	QUENT REPORT OF:	
			WATER SHUT-OFF	REPAIRING WELL	
TEST WATER SHUT-OFF FRACTURE TREAT	MULTIPLE COMPLETE	·•	FRACTURE TREATMENT	ALTERING CASING	
SHOOT OR ACIDIZE	ABANDON*		SHOOTING OR ACIDIZING	ABANDONMENT*	
REPAIR WELL	CHANGE PLANS		(Other)	ts of multiple completion on Well	
(Other) Perfor	m Remedial Work	the all postionert	Completion of Recon	Dietton Report and Mon rotally	
17. DESCRIBE PROPOSED OR C proposed work. If	well is directionally drilled, give s	ubsurface locatio	ons and measured and true vert	is, including estimated date of starting an ical depths for all markers and zones per	
nent to this work.) *	•				
	• •				
1.	Pull tubing and clean	n well out	to TD of 3477'.		
2.	Log well and perforat Run rods & tubing and	te if nece i nlace we	11 on production.		
J.	Kull 1005 & cubing and	i prace ne	iii on produceront		
			•		
	•	·		•	
	2.0			-	
IS. I hereby certify that	the foregoing ly true and correct				
SIGNEDE Little Bar	C. C. C. Simon	TITLE OPE	erations Supt. Weste	ern Areatre 2-5-74	
(This space for Feder	al or State office use)				
	···· ··· ·	መመጡ እ		DATE //	
APPROVED BY CONDITIONS OF AP	PROVAL, IF ANY:	TITLE		1974 12/1/15	
			1 . FB 11	V. C.T.	
			D CIL XX		
	*S2	e Instructions	on Reverse Side	1	