	D STATES SUBMIT IN TRIPLIC (Other Instructions of OF THE INTERIOR verse side)	
	ICAL SURVEY	LC 032511 (a)
SUNDRY NOTICES A	ND REPORTS ON WELLS	6. IF INDIAN, ALLOIT 75 OR TRIBE NAT
(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.)		7. UNIT AGREEMEN'S NAME
OIL GAS WELL OTHER		Langlie-Jal Unit
2. NAME OF OPERATOR	· · · · · · · · · · · · · · · · · · ·	8. FARM OR LEASS NAME
UNION TEXAS PETROLEUM CO 3. Address of operator	JRPORATION	9. WELL NO.
1300 Wilco Building, Midland, Texas 79701 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface		84
		10. FIELD AND POOL, OR WILDCAT
	•	Langlie-Mattix (Queen 11. SEC., T., B., M., OR BLE. AND SURVEY OK J281
• Unit Letter "M", 660' FSL &	660' FWL	Sec. 9, T-25-S, R-37-
	VATIONS (Show whether DF, RT, GR, etc.)	12. COUNTI OB PARISH 13. STATE
	3156' DF	Lea New Mex
•••	e Box To Indicate Nature of Notice, Report,	
NOTICE OF INTENTION TO:		UBSEQUENT REPORT OF:
TEST WATER SHUT-OFF PULL OR A FRACTURE TREAT MULTIPLE	LTER CASING WATEB SHUT-OFF COMPLETE FRACTURE TREATMENT	ALTEBING CASING
SHOOT OR ACIDIZE ABANDON*	SHOOTING OR ACIDIZIN	
REFAIR WELL CHANCE PI	ANS (Other)	results of multiple completion on Well
(Other) Clean out and Deepen	X Completion or R Clearly state all pertinent details, and give pertinent	ecompletion Report and Log form.)
17. DESCRIBE FRONSED OR COMPLETED OPERATIONS (proposed work. If well is directionally drill nent to this work.)*	ed, give subsurface locations and measured and true	vertical depths for all markers and zones j
·		
1. RIL and re-enter we	all and clean out to original TD	2/661
2. Deepen well to TD 3. Log well to TD.		3400.
4. Run approximately	730' of 4" casing and cement w/	100 Sx. 50/50 Pozmix and
circ. (Test casing	g)	
5. Perforate Seven-Ri 6. Stimulate if neces	vers Queen zone and acidize.	
7. Run tubing and roc		
	nit and place well on production	•
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· *		
		· · · ·
		·
18. I hereby certify that the foregoing is true and	· ·	1 17 70
SIGNED Alawluf H. Cost		<u>yst</u> DATE <u>1-17-75</u>
(This space for Federal or State office use)		
APPROVED BY	TITLE	
CONDITIONS OF APPROVAL, IF ANY:	1 - 2119	11° (H°)
	An	OWN
	*See Instructions on Reverse Sider	-inter-
	$\sum_{i=1}^{n} e^{i i i i i i i i i i i i i i i i i i i $	