DEPARTMEN BUREAU OF SUNDRY NOTICES Do not use this form for proposals to dr	TED STATES NT OF THE INTERIOR LAND MANAGEMENT AND REPORTS ON WELLS ill or to deepen or reentry to a different reservoir. R PERMIT—" for such proposals	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No. NMLC060941 6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation
1. Type of Well Oil Gas Other Well Other Other		8. Well Name and No.
ARCO Oil and Gas Company		Langlie B Federal #1 9. API Well No.
3. Address and Telephone No. P.O. Box 1710 - Hobbs, New Mexico 88241-1710 (505) 391-1600 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		30-025-11586 11/1/92 10. Field and Pool, or Exploratory Area (1974)
Unit A, 990' FNL & 330' FE. Section 14, T25S, R37E		Justis Blinebry Luke Brank 11. County or Parish, State Crunkura Eddy, New Mexico
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent X Subsequent Report	Abandonment Recompletion Plugging Back Casing Repair	Change of Plans New Construction Non-Routine Fracturing Water Shut-Off
Final Abandonment Notice	Altering Casing X Other Scale Treatment	Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
05/19/92 - Rig up kill truck.	pertinent details, and give pertinent dates, including estimated date of starting all depths for all markers and zones pertinent to this work.)* Pressure tubing to 300#. Pumped 10 on casing, flushed with 5 bb1 2% KCL was all 15 bb1 2% KCL wa	g any proposed work. If well is directionally drilled. 000 gas 15% HCL vater. Shut-in
150 bb1 2% KCL wat Shut-in well overn	ed 45 bbl SOC treatment down casing, for the case of 3^{1} and	PM. RDMO.
	ALL TECHNOR LIBERTY OF THE SECONDARY	9.43
14. I hereby certify that the foregoing is true and correct Signed Access Agents	Tide Operations Coodinator	Date06/11/92
(This space for Federal State office use) Approved by Conditions of approval, if any:	Title	Date