

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form 9-331  
Bureau of Land Management (No. 42-R1424)

5. LEASE DESIGNATION AND SERIAL NO.

NM 036452

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

## 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"/>	7. UNIT AGREEMENT NAME Langlie-Jal Unit
2. NAME OF OPERATOR Union Texas Petroleum Corporation	8. FARM OR LEASE NAME
3. ADDRESS OF OPERATOR 1300 Wilco Building, Midland, Texas 79701	9. WELL NO. 90
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  Unit Letter "G", 1650' FNL & 2310' FEL	10. FIELD AND POOL, OR WILDCAT Langlie-Mattix (Queen)
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 17, T-25-S, R-37-E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3118' GR	12. COUNTY OR PARISH Lea
	13. STATE New Mexico

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input checked="" type="checkbox"/> Clean out and deepen	

(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. April 12, 1975, re-entered well and pulled tubing, rods and pump.
2. Cleaned out to original PBTD 3394' and drilled out liner to original T.D. 3415'. Deepened well to T.D. 3565'. (3-3/4" hole).
3. April 19, 1975, logged well to T.D. 3565'.
4. April 20, 1975, Frac'd open hole with 30,000 gals 2% KCL water, 30,000# 20/40 sand and 1000 gals, 15% NE acid, using rock salt as diverting agent.
5. April 24, 1975, ran tubing, rods, and pump. Well is now ready to be placed on production.

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

SIGNED Stanley A. Best

TITLE Gas Measurement Analyst

DATE April 25, 1975

(This space for Federal or State office use)

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

TITLE \_\_\_\_\_

\*See Instructions on Reverse Side

ACCEPTED FOR RECORD

APR 28 1975

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO