Form 9-331						approved		
(Mar. 1009)	DEPARTME	UN D STATES SUBMIT IN TRIPL EPARTMENI OF THE INTERIOR (Other instructions re- verse side)				Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.		
GEOLOGICAL SURVEY					ł	LC 054667		
SUNDRY NOTICES AND REPORTS ON WELLS						ALLOTTEE OR TRI	BE NAME	
(Do not use this fo				WELLS to a different reservoir. ais.)				
1. UIL GAS GAS WELL OTHER						7. UNIT AGREEMENT NAME		
2. NAME OF OPERATOR						8. FARM OR LEASE NAME		
Texas Pacific Oil Company, Inc. 3. ADDRESS OF OPERATOR						R. O. Gregory		
P. O. Box 4067, Midland, Texas 79701 LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 330' FSL & 2310' FEL								
						10. FIELD AND POOL, OR WILDCAT		
						Langlie Mattix ^{11. SEC., T., R., M., OR BLK. AND ^{SURVEY} OR ABDA Unit O, Sec. 33}		
14. PERMIT NO.	1	5. ELEVATIONS (SP	now whether DF, RT, (IR, etc.)		B PARISH 13. ST	ATE	
· · · · · · · · · · · · · · · · · · ·		2	992' DF		Lea	N. I	M	
16.	Check Appro	opriate Box To	Indicate Natur	e of Notice, Report, o	r Other Data			
						JENT REPORT OF :		
TEST WATER SHUT-OFF	PUL	, OR ALTER CASIN	G	WATER SHUT-OFF	REP	AIRING WELL		
FRACTURE TREAT	MUL.	TIPLE COMPLETE		FRACTURE TREATMENT	AL.T	ERING CASING		
SHOOT OR ACIDIZE		NDON*		SHOOTING OR ACIDIZING	Well Sta	NDONMENT*	<u></u>	
(Other)	(Other) (Other					of multiple completion on Well		
17. DESCRIBE PROPOSED OR C proposed work. If y nent to this work.)*	OMPLETED OPERAT	IONS (Clearly sta y drilled, give su	te all pertinent det ibsurface locations	alls, and give pertinent da and measured and true ver	tes, including estimatical depths for all	ated date of sta: markers and zo	rting any nes perti-	
This well she potential. well. The c	buld not be There are t losest beir to the nort	e P&A'd at five second ng Mobil Of theast. Pi	this time b dary recover il Co.'s Lar resent plans	reserves remain because of it's ry units located nglie Mattix (Quo s are to initiato	secondary re within six een) Unit ap	covery miles of proximate	this	
	This apr aban	proval of t donment exp	emporary f	30-29		、		
18. I hereby certify that the SIGNED	e foregoing is tru	efand orrect	TITLE _Reg. (Oper. Supt. (Wes	t) DATE -	10/10/78		
(This space for Federal	or State office u	se)	<u></u>	TET TOR	RECOKU	Λ.		
APPROVED BY CONDITIONS OF APP	ROVAL, IF ANY	•	TITLE	Oper. Supt. (Wes ACCEPTED FOR OCT 1 Reverse Side GEOLOG HOBBS, NE	2 1978 JUNEY	\$		
				HOBE				