DEPARTMENT THE INT		SUBMIT IN TRIPLICAL (Other histrictions ITERIOR yerse side)	5. LEASE DESIGN	Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.	
SUNI	ORY NOTICES AND REPO	RTS ON WELLS	LC-05466 6. IF INDIAN, AL	LOTTEE OR TRIBE NAME	
(Do not use this form for proposals to drill of the drill				7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME	
3. ADDRESS OF OPERATOR			9. WILL NO.		
Post Office Box 10426 Midland, Texas 79702				10. FIELD AND POOL, OR WILDCAT	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)				Langlie Mattix	
660 FSL & 990 FEL (P)				M., OR BLK. AND R AREA	
			1	T-25-S, R-37-E	
14. PERMIT NO.	15. ELEVATIONS (Show w. 3007 DF	hether DF, RT, GR, etc.)	12. COUNTY OR Lea	PARISH 13. STATE NM	
16.	Check Appropriate Box To Ind	icate Nature of Notice, Report,			
N	OTICE OF INTENTION TO:	SUI	BSEQUENT REPORT OF:	·	
TEST WATER SHUT-OF	PULL OR ALTER CASING	WATER SHUT-OFF		IRING WELL	
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT		DONMENT*	
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING (Other)			
(Other) Pump te	change plans	- (Norm: Penert Pe	sults of multiple comp completion Report and	letion on Well Log form.)	
17. DESCRIBE PROPOSED OR proposed work. If nent to this work.)	COMPLETED OPERATIONS (Clearly state all well is directionally drilled, give subsurf				
pump test we duced will be R-37-E on sa from R. O. Ge R-37-E and Ge R-37-E on the Any water produced to the same water produced t	to install pumping unit and the determine if well to determine if well to transferred to oil tank me lease and sold. Oil was regory No. 3 located 330 Gregory "A" No. 5 located are same lease. Any gas produced will be disposed as al System as approved by	is economical to produce to located in Unit O Security Will be co-mingled with FSL & 660 FWL Section 3 1980 FSL & 660 FEL Section of into Rice Engineering	etion 33, T-25 oil produced 33, T-25-S, tion 33, T-25- during test pe	-S, -S,	
			1 place	• • • • • • • • • • • • • • • • • • •	
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18. I hereby certify that	the foregoing is true and correct			1 2 100	
SIGNED Jaw	Ja. Riman TIT	LEEngineer	DATE	August 7, 1985	
			DATE /	8-14-55	
APPROVED BY CONDITIONS OF A	PPROVAL, IF ANY:	LE			