

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.

## 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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>W.I.W.</u>		6. IF INDIAN, ALLOTTEE, OR TRIBE NAME <u>20-022-2742</u>	
2. NAME OF OPERATOR <u>Mobil Oil Corporation</u>		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR <u>P. O. Box 633, Midland, Texas 79701</u>		8. FARM OR LEASE NAME <u>Langlie Mattix Queen Unit</u>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  <u>1980' FNL &amp; 1730' FWL of Sec. 15, T-25-S, R-37-E</u>		9. WELL NO. <u>15</u>	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT <u>Langlie Mattix (Queen)</u>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>3106' GR.</u>		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>Sec. 15, T-25-S, R-37-E</u>	
		12. COUNTY OR PARISH <u>Lea</u>	
		13. STATE <u>New Mexico</u>	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Cement Test &amp; Cement Job</u> <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(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.)\*

10/23 LANGLEIE-MATTIX QUEEN UNIT, WELL #15  
(8) 3700 TD 1m, 7-7/8" hole, 2-1/4 @ 3700. 10.1-33-3% oil.  
Finish hole @ 2:00 p.m. 10/22/69, circ. 2 hrs, POH, Schl. ran GR-N-Caliper logs from 1025-3700/4 hrs, ran bit to bottom, circ 1 hr, P & LD DP & DC's, now running 5-1/2 csg. 50 jts. in hole.

10/24 LANGLEIE-MATTIX QUEEN UNIT, WELL #15, 3700 TD.  
WOC 5-1/2 csg, finish running 5-1/2 csg. 3700' 116 jts, 30 jts. 5-1/2 15.50 J55 LT&C + 86 jts. 5-1/2 J55 ST&C csg, cement on bottom by BJ Serv w/760x Class C 6% gel + 100x Class C Neat, all cement contained 1/4# flocele, PD @ 9:00 a.m. 10/23/69, lost circ. pumping plug down cement, did not cir, WOC 6 hrs, Worth Well ran Temp. Survey to 3657, top of cement @ 1525, BJ Serv. cemented down 8-5/8 surf. csg. w/ 365x Class H cement, CP 700, 5-1/2" csg. press 1800, job compl. @ 5:30 p.m. 10/23/69, NU 5-1/2 csg, rel C. A. Nunn Drlg. Co. rig @ 11:00 p.m. Will MOR as soon as possible.  
Tested 5 1/2" OD Casing at 1500# 30 mi/ OK

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

SIGNED

TITLE Authorized AgentDATE 10-28-69

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

NOV 18 1969

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

\*See Instructions on Reverse Side