

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other instructions
reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

10-032511-9

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Langlie Mattix Queen Unit

9. WELL NO.

15

10. FIELD AND POOL, OR WILDCAT

Langlie Mattix (Queen)

11. SEC., T., R., N., OR BLK. AND
SURVEY OR AREA

Sec. 15, T-25-S, R-37-E

12. COUNTY OR PARISH

13. STATE

La.

New Orleans

1. OIL WELL ☐ GAS WELL ☐ OTHER W.I.W. ☐

2. NAME OF OPERATOR

Mobil Oil Corporation

3. ADDRESS OF OPERATOR

P.O. Box 633, Midland, Texas

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

1980' EIL & 1730' EIL of Sec. 15, T-25-S, R-37-E

14. PERMIT NO.

15. ELEVATIONS (Show whether PP, RT, CR, etc.)

3106' Gr.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐ (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

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.) *

LANGLIE MATTIX QUEEN UNIT #15

10/16 (1) 730 drlg anhy, 12 1/4" hole, 1/2" @ 240, 1/2" @ 432, 3/4" @ 650. S mud
C. A. Nann Drilling Co. spud in @ 11:30 a.m., 10-15-69.

LANGLIE MATTIX QUEEN UNIT #15

10/17 (2) 1025 ND, WOC 8-5/8" csg, ran 8-5/8" 20# MJ STAC csg, cemented on bottom
@ 1025 by Henco w/500x Class-HB% gel cement containing 1/4# floccula/n + 200x
Class H cement, all cement contained 2% CaCl, plug down @ 12:00 mid-nite
10-16-69, cement circ, WOC.

LANGLIE-MATTIX QUEEN UNIT #1-5, UNIT WELL #15

10/18 (3) 1875 drlg anhy & salt, 7-7/8" hole, 1/2" @ 1210, 3/4" @ 1505, 1" @ 1725. Br wtr.
WOC total 19 hrs, tested csg & BOP's w/ 1000#/30 min/ok.

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

SIGNED

Camille

TITLE

Authorized Agent

DATE

10-22-69

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

District Engineer

OCT 22 1969

*See Instructions on Reverse Side