Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

## State of New Mexico Ene. , Minerals and Natural Resources Department

Form C-103

Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240  DISTRICT II P.O. Drawer DD, Artesia, NM 88210	OIL CONSERVATIO P.O. Box 208 Santa Fe, New Mexico	88	WELL API NO. 30- 5. Indicate Type of Le	025-23298	
DISTRICT III				STATE FEE XX	
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Les	ise 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" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Name		
1. Type of Well: OIL GAS WELL WELL	one Water	Injection Well	Langlie Mattix Queen Unit		
2. Name of Operator			8. Well No.		
3. Address of Operator	mpany, L.P.			9. Pool name or Wildcat	
•	04 Park Central Drive, Suite 400, Dallas, Texas 75251			Langlie Mattix 7 Rivers Queen	
4. Well Location  Unit LetterL :1470	O Feet From The South	Line and1220			
Section 11	Township 25S Ra	nge 37E	NMPM Lea	County	
	10. Elevation (Show whether		V/		
3110' GR					
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data					
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	AL1	TERING CASING	
TEMPORARILY ABANDON	ANDON CHANGE PLANS COMMENCE DRILLING OPNS.			JG AND ABANDONMENT	
PULL OR ALTER CASING	L OR ALTER CASING CASING TEST AND C		EMENT JOB		
OTHER:			ng well past pl	ug back X	
12. Describe Proposed or Completed Opera work) SEE RULE 1103.	tions (Clearly state all persinent details, an	d give pertinent dates, inclu	ding estimated date of star	ting any proposed	
and packer. TIH with 3190'-3330'. Cleaned 15% NEFE, TOH with 2	05-90: MIRU Clarke Well h 2-7/8" tubing and 4-3 d hole to 3430". Circu-7/8" tubing and 4-3/4" 3051" with 15,000# tero injection.	3/4" bit, tagged lated hole clear bit. TIH with	d TD @ 3190'. an. Acidize w h 2-3/8" tubing	Drilled from ith 2000 gallons g and Baker AD-1	
I hereby certify that the information above is true	e and complete to the best of my knowledge sad	belief.			
All Mar	100 -	Regulatory	Analyst	12-20-90	
SIGNATURE SIGNATURE				TOT TOURS AND	
TYPE OR PRINT NAME  (This space for State Use)				TELEPHONE NO.	
APPROVED BY	тп	·		DATE	