COPIES RECEIVED	\neg		
TRIBUTION			
FE	NEW MEXICO OIL CONSERVATION COMMISSION		Form C-103 Supersedes Old
FILE			C-102 and C-103
U.S.G.S.			Effective 1-1-65
LAND OFFICE			Sa. Indicate Type of Lease
OPERATOR	-		Store X
	J		5, State Oil & Gas Lease No.
Clarify			B-1506
(DO NOT USE THIS FORM FOR PR	RY NOTICES AND REPORTS (DROBALS TO DELLE OR TO DEEPEN OF PLU TION FOR PERMIT - " (FORM C-101) FOR)N WELLS	D-1300
USE VAPOLICAT	TON FOR PERMIT - " (FORM C-101) FOR	G BACK TO A DIFFERENT RESERVOIR.	
OIL GAS WELL WELL			
Name of Operator UNION TEXAS PETROLEUM CORPORATION Address of Operator		7. Unit Agriement Name	
		Langlie-Jal Unit	
Address of Operator	DLEUM CORPORATION		8. Farm or Lease Name
1300 Wilco Building, Midland, Texas 79701 UNIT LETTER P 660 FEET FROM THE East LINE AND 660 FEET F		9. Well No.	
		23	
UNIT LEFTER	660 FEET FROM THE East	660	10. Field and Pool, or Wildat
South	The same of the sa	LINE AND DOU FEET FRE	Langlie-Mattix
THE South LINE, SECTIO	N 32 TOWNSHIP 24-S	27 7	THE STATE OF THE S
······································			
	15. Elevation (Show whethe	r DF, RT, CR	//////////////////////////////////////
711111111111111111	2253' GR		12, County
Check A	Opropriate Boy To Lati		Lea
NOTICE OF IN	TENTION TO:	Nature of Notice, Report or O	ther Data
		SUBSEQUEN	T REPORT OF:
FORM REMEDIAL WORK	BLUC AND		Mar off, Op.
PORARILY ASANDON	PLUG AND ABANDON	REMEDIAL WORK	* 1.==
L OR ALTER CASING		COMMENCE DRILLING OPNS.	ALTERING CASING
61	CHANGE PLANS	CASING TEST AND CEMENT JOB	THEMHOCHABA DHA DUJE
Clean out & deepen		OTHER	
Jescriba Dan			
work) SEE RULE 1703.	itions (Clearly state all pertinent deta	ils, and give pertinent dates, including	
		s, and give pertinent dates, including	estimated date of starting any propo-
1. RU and re-ente	r well and clean out to 3725' and run loss (7	Original ED Cocce	
2. Deepen well to	3725' and run logs (7	7/8" bol-	
3. Run 4½", 9.5#	casing to TD and cement	7/8" hole). with approx. 600 sx. o ement to surface.	
Class "C". Cal	culated to circulate c 1500 psi for 30 min	ement to approx. 600 sx. o	f HCL and 250 sx. of
		roma fi di a	
6. Give zone acid	stimulation.	Induitions.	
/• Run 2 3/8" plas	tic coated tubing and	ecor	
	A and	9667 place well on water inje	ection.
reby certify that the information above	is the and complete to the box		
MI I Shake	e is the and complete to the best of m	y knowledge and belief.	
1 20 cd / /	Alama :		
1.0	TITLE Operat	ions Supt Westorn A	
		ions Supt. Western Area	DATE April 29, 1974
Or.	g. Signed ha		
jΩ	D Romey TITLE		DATE PARTY TO THE
THE OF ACCROVAL, IS ANY.	1 13		DATE IT IN 1 17 TOP
	ы. 1, Supr		