

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil Conservation Division  
1625 N. French Dr.  
Hobbs, NM 88240

FORM APPROVED  
OMB No. 1004-0135  
Expires November 30, 2000

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.*

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

1. Type of Well  
☐ Oil Well ☐ Gas Well ☒ Other **WATER INJECTION WELL**

2. Name of Operator  
**KENSON OPERATING COMPANY INC.**

3a. Address **P.O. BOX 3531, MIDLAND TX 79702** 3b. Phone No. (include area code) **915/685.0878**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

**1980' FWL & 660' FSL Sec. 5 T25S R37E UL N**

5. Lease Serial No.

**LC-055546**

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

**LANGLIE JAL UNIT**

8. Well Name and No.

**LANGLIE JAL UNIT 65**

9. API Well No.

**30-025-23885**

10. Field and Pool, or Exploratory Area

**LANGLIE MATTIX (SRQGB)**

11. County or Parish, State

**LEA, NEW MEXICO**

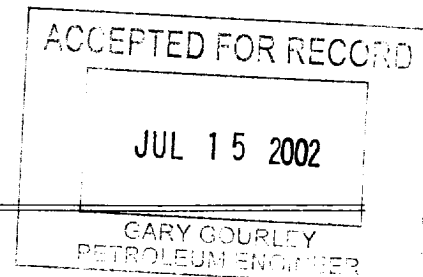
**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <b>Reactivate</b>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

7-3-02 MI&RU. Released packer. POH with tubing and packer. TIH open ended, tagged fill at 3330' (top perf. 3326'). RIH with bit and bailer. Cleaned out hole to 3560'. RIH with packer and tubing. Circulated packer fluid. Set packer @ 3260'. Pressure tested and charted well to 360# (chart attached).

Return to injection.



14. I hereby certify that the foregoing is true and correct  
Name (Printed/Typed)

**M. A. SIRGO, III**

Title **ENGINEER**

Signature

*[Handwritten Signature: M. A. Sirgo]*

Date **7-8-02**

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*[Handwritten initials: K2]*

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KENSON OPT. Co. INC.

L.I.U. # 65 W.I.W.

N- sec 5-T255-R. 37E

Rapid Transport Records S/N. 6014

Cal- 4/1/02, 1000 ft, 8" KEY MEASUREMENT

RAPID TRUCK DRIVER

*[Handwritten signatures]*

KENSON REP  
CHRIS MICHAEL

*[Handwritten signature]*

GRAPHIC CONTROLS CORPORATION  
BUFFALO, NEW YORK

BR 2221

NOON

11

MIDNIGHT

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