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Form 9-331 (May 1963) UNLIED STATES SUBMIT IN TRIPLICATE* DEPARTMENT OF THE INTERIOR (Other Instructions on re- DEPARTMENT OF THE INTERIOR verse side)		Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.	
GEOLOGICA	LC-055546		
SUNDRY NOTICES AND	6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
(Do not use this form for proposals to drill or t Use "APPLICATION FOR PER	· · · · · · · · · · · · · · · · · · ·		
		7. UNIT AGREEMENT NAME	
OIL CAS WELL CAS OTHER		Langlie-Jal Unit	
2. NAME OF OPERATOR		8. FARM OR LEASE NAME	
UNION TEXAS PETROLEUM CORPORATION 3. ADDRESS OF OPERATOR			
	nd Tayas 7070h o 🖻 🖓	9. WELL NO.	
1300 Wilco Building, Midla 4. LOCATION OF WELL (Report location clearly and in ac	cordance with any State requirements.	10. FIELD AND FOOL, OR WILDCAT	
See also space 17 below.) At surface	10 10 10 1077	Langlie-Mattix (Queen)	
	10-3-3-3-3-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-	11. SEC., T., R., M., OB BLK. AND SURVEY OF ABBA	
Unit Letter "I", 660' FEL 14. PERMIT NO. 15. ELEVATION.	S (Show whether DF, BT, GB, etc.)	Sec. 5; T-25-S; R-37=E 12, COUNTY OF PARISHI 13, STATE	
	20.1' GL	lea New Mexico	
	x To Indicate Nature of Notice, Report, or		
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NOTICE OF INTENTION TO:		BQUENT REPORTION:	
TEST WATER SHUT-OFF PULL OR ALTER (BBPAIBING WELL	
FRACTURE TREAT MULTIPLE COMPI SHOOT OR ACIDIZE X ABANDON*	ETE FRACTURE TREATMENT SHOOTING OR ACIDIZING	ABANDONMENT	
BEPAIR WELL CHANGE PLANS	(Other)		
(Other)	(NOTE: Report resu Completion or Recor	ilts of multiple completion on Well and the second se	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly proposed work. If well is directionally drilled, gi	y state all pertinent details, and give pertinent dat ve subsurface locations and measured and true ver	es, including estimated date of starting any tical depths for all markers and zones perti-	
nent to this work.) *	· · · · · · · · · · · · · · · · · · ·		
	· · ·		
1. RU and re-enter well.			
 Pump down tubing and sp Acidize well with 2000 gallon stages. 	ot 100 gallons of iron stabili gallons of iron stabilized 15%	acid in four 500 control acid	
4. After leaving well shut	in 6 to 8 hours, return to pr	oduction	
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		전실학을 정확하는 전성학	
18. I hereby certify that the foregoing is true and corre			
SIGNED _ Tienky A Jon	TITLE Senior Production Ana	XDDD	
(This space for Federal or State office use)			
APPROVED BY	TITLE		
CONDITIONS OF APPROVAL, IF ANY:		IT IN	
	· · · · · · · · · · · · · · · · · · ·	BERNARD MORDZ	

*See Instructions on Reverse Side



