

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO. 30-025-27845
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Langlie Jal Unit
8. Well No. 100
9. Pool name or Wildcat Langlie Mattix (SRQ)

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.)

1. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER	2. Name of Operator GP II Energy, Inc.	3. Address of Operator P. O. Box 50682, Midland, Tx. 79710	4. Well Location Unit Letter <u>L</u> : <u>1426</u> Feet From The <u>S</u> Line and <u>1300</u> Feet From The <u>W</u> Line Section <u>32</u> Township <u>24 S</u> Range <u>37 E</u> NMPM Lea County
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10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☐
	OTHER: Add pay ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

01-08-96 MIRU PU. Pull pump & rods out of hole. Tag bottom. Pull 115 jts 2 3/8" tbg, tallying out of hole.
01-09-96 Ru loggers. Run PND log.
01-10-96 Perf: 3358'-3360', 3403'-3405', 3438'-3445', 3451'-3458', 3469'-3471', 3505'-3507', 3528'-3530', 3532'-3534',
(3 SPF, 26', 78 holes.) Acidize perfs w/4000 gals 7 1/2% FeAs 2x.
01-11-96 POH w/tools. RIH w/prod equip 44' off bottom. Run pmp & rods. RTP.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE George P. Mitchell, II TITLE President DATE 1-16-96

TYPE OR PRINT NAME George P. Mitchell, II TELEPHONE NO. 915-684-4748

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE SEP 20 1996

CONDITIONS OF APPROVAL, IF ANY:

