

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
LC-055546

8. IF INDIAN, ALLOTTEE OR TRIBE NAME

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—" for such proposals.)

1. OIL ☒ GAS ☐ OTHER ☐
WELL WELL

2. NAME OF OPERATOR
Union Texas Petroleum Corporation

3. ADDRESS OF OPERATOR
4000 N. Big Spring, Suite 500, Midland, Texas 79705

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
Unit C, 1142' FNL & 2518' FWL Sec.

7. UNIT AGREEMENT NAME

Langlie Jal Unit

8. FARM OR LEASE NAME

9. WELL NO.

107

10. FIELD AND POOL, OR WILDCAT

Langlie Mattix (Queen)

11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA

Sec. 4, T-25-S, R-37-E

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, RT, GR, etc.)

3227 Gr.

12. COUNTY OR PARISH

Lea

13. STATE

NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐ PULL OR ALTER CASING ☐
FRACTURE TREAT ☐ MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐ ABANDON* ☐
REPAIR WELL ☐ CHANGE PLANS ☐
(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐
FRACTURE TREATMENT ☐ ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐ ABANDONMENT* ☐
(Other) Initial Drilling ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

12-11-84 MIRU Kenai Rig #31. Spud 12-1/4" hole @ 5:00 p.m.

12-13-84 Ran 8-5/8" 24# casing to 833' and cemented w/ 600 sx C1 "C". Cement Circulated.

18. I hereby certify that the foregoing is true and correct

SIGNED *William R. Higgins*

TITLE Regul. Compl. Coord.

DATE 12-18-84

(This space for Federal or State office use)

APPROVED BY *LWR*

TITLE

DATE

CONDITIONS OF APPROVAL DEC 3 1984

Carlsbad NEW MEXICO

*See Instructions on Reverse Side