

NOVEMBER 1983)
Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on re-
verse side)

Replaces Bureau No. 1504-0125
Expires August 31, 1985

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.
See "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	2. NAME OF OPERATOR Texaco Producing Inc.	3. FIELD AND POOL, OR WILDCAT Langlie Mattix SRQ
4. ADDRESS OF OPERATOR PO Box 728 Hobbs New Mexico 88240	5. WELL NO. 230	6. FIELD AND POOL, OR WILDCAT Langlie Mattix SRQ
7. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit Letter L 1980 FSL and 760 FWL	8. ELEVATIONS (Show whether DV, ST, OR Gd.) 3265.6L	9. FIELD AND POOL, OR WILDCAT Langlie Mattix SRQ
10. PERMIT NO.	11. COUNTY OR PARISH Lea	12. STATE N.M.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANE ☐	(Other) <u>Temporarily Abandon</u> ☒	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Specify 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.)

5/31/86 MIRU Pulling Unit. TOH with rods Pump and tubing.
6/1/86 Ran and set Bell Model N CIBP at 3280. Dumped 38' of cement on top of CIBP. PBTD 3242'.
6/3/86 Ran tubing and circulated inhibitor (WT-1270). TOH with tubing. Temporarily Abandoned

APPROVED FOR 1/2 MONTH PERIOD
ENDING 2/10/88

I hereby certify that the foregoing is true and correct

SIGNATURE [Signature] TITLE Area Supt. DATE 2-4-87

(This space for Federal or State Office use)

APPROVED BY _____ TITLE _____ ACCEPTED FOR RECORD
CONDITIONS OF APPROVAL IF ANY _____ DATE _____

*See Instructions on Reverse Side

RECEIVED
FEB 11 1987
OCD
HOBBS OFFICE