

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.
LEASE DESIGNATION AND SERIAL NO.

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 WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR TEXACO Inc.		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 728 Hobbs, New Mexico 88240		8. FARM OR LEASE NAME A.H. Blinebry Fed NCT-1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 330' FSL & 2310' FEL of Sec 19, T-22-S, R-38-E, Unit Letter 'O', Lea County, New Mexico.		9. WELL NO. 41	
14. PERMIT NO. Regular		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3358' (GR)	
		10. FIELD AND POOL, OR WILDCAT Drinkard	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 19, T-22-S, R-38-E	
		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 <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>

(Other) Open Drinkard Zone

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>

(Other) (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.) *

1. Rig Up. Install BOP. Pull rods, pump and tubing.
2. Set CIBP @ 7200' to temporarily abandon Granite Wash.
3. Perforate 7" OD Csg liner w/1-JSPF @ 6936', 66', 88', 7037', 43', 74', 93', 7103', 11', 23', 55', & 7161'.
4. Set packer @ 6850'. Acidize 7" OD lower Drinkard perforations 6936'-7161' w/3600 gal 15% NE Acid in 3-equal stages using 6-Ball sealers between stages. Flush w/treated water.
5. Set RBP @ 6900' and dump 2 sx sand on plug.
6. Perforate 7" OD Csg liner w/2-JSPF @ 6310', 39', 50', 67', 83', 6418', 31', 42', 61', 6553', 62', 98', 6635', 53', 87', 6726', 53', 58', 83', 6803', 69', & 6895'.
7. Set pkr @ 6260'. Acidize upper Drinkard perforations 6310'-6895' w/5000 gal 15% NE Acid in 2-equal stages using 12 Ball Sealers between stages. Flush w/treated water Swab.
8. Pull RBP @ 6900'.
9. Install production equipment. Test and place on production.

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

SIGNED

TITLE Asst. Dist. Supt.

DATE 4-18-77

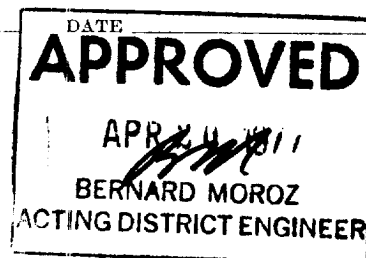
(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side



APPROVED

RECEIVED

1012 1977

COMM. COMM.
10/11/77