

CORRECTED
UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N.M. Oil Conservation Division
P.O. Box 1980
Hobbs, NM 88241

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT -" for such proposals

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.
LC032104

6. If Indian, Alottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and Number
BLINEBRY, A. H. FEDERAL NCT-3
1

9. API Well No.
30 025 12175

10. Field and Pool, Exploratory Area
BLINEBRY/TUBB OIL & GAS

11. County or Parish, State
LEA, NEW MEXICO

SUBMIT IN TRIPLICATE

1. Type of Well: ☒ OIL WELL ☐ GAS WELL ☐ OTHER

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

3. Address and Telephone No. 205 E. Bender, HOBBS, NM 88240 397-0405

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Unit Letter D : 660 Feet From The NORTH Line and 660 Feet From The
WEST Line Section 31 Township 22S Range 38E

12. Check Appropriate Box(s) To Indicate Nature of Notice, Report, or Other Data

TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Attering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> OTHER: REQUEST TA APPROVAL	<input type="checkbox"/> Dispose Water

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

13. 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.)*

CIBP WAS SET ABOVE BLINEBRY PERFORATIONS WITH 35' CEMENT ON TOP OF PLUG. THE CASING WAS TESTED TO 520# ON 7-16-97. THE SUBSEQUENT REPORT DETAILING ABOVE ACTIVITIES WAS ACCEPTED FOR RECORD BY BLM ON 12-01-97. REQUEST TA APPROVAL FOR POSSIBLE HORIZONTAL RE-ENTRY.

APPROVED FOR 12 MONTH PERIOD
JUL 16 1999
ENDING

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

SIGNATURE J. Denise Leake TITLE Engineering Assistant DATE 4/9/98

TYPE OR PRINT NAME J. Denise Leake

(This space for Federal or State Police use)

APPROVED BY David R. Glass TITLE PETROLEUM ENGINEER DATE APR 30 1998

CONDITIONS OF APPROVAL, IF ANY:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.