Form 9-331
(May 1963)

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.

CLC-032104

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

NONE

1.

OIL WELL [X] GAS WELL [ ] OTHER

7. UNIT AGREEMENT NAME

NONE

2. NAME OF OPERATOR

TEXACO Inc.

8. FARM OR LEASE NAME

A. H. Blinebry NCT-4

3. ADDRESS OF OPERATOR

P. O. Box 728 - Hobbs, New Mexico

9. WELL NO.

4

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface

Well located Unit Letter M, Section 31, 990' from the South Line, and 990' from the West Line of Section 31, T-22-S, R-38-E, Lea County, New Mexico.

10. FIELD AND POOL, OR WILDCAT

Drinkard

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

Sec. 31, T-22-S, R-38-E

14. PERMIT NO.

Regular

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

3324' (D. F.)

12. COUNTY OR PARISH | 13. STATE

Lea | N. M.

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF [ ]
FRACTURE TREAT [ ]
SHOOT OR ACIDIZE [ ]
REPAIR WELL [ ]
(Other)

PULL OR ALTER CASING [ ]
MULTIPLE COMPLETE [ ]
ABANDON* [ ]
CHANGE PLANS [ ]

SUBSEQUENT REPORT OF:

WATER SHUT-OFF [ ]
FRACTURE TREATMENT [ ]
SHOOTING OR ACIDIZING [X]
(Other)

REPAIRING WELL [ ]
ALTERING CASING [ ]
ABANDONMENT* [ ]

(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.) *

The following work has been completed on subject well:

1. Kill the well, and pull pump equipment.

2. Perforate casing with two jet shots at 6608', 6646', 6688', 6698', 6727', and 6816'.

3. Acidize perforations with 4500 gallons 24% acid in 3 stages with ball sealers between stages, and 135 gallons non-emulsion agent with 1500 gallons water over-flush. Swab well, recover load, and Test.

4. On 24 Hour Potential Test ending 4:30 P. M. April 17, 1967, well pumped 7 BBL Oil & 10 BBL Water.
   GOR - 5429
   GRAVITY - 38.4

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

SIGNED _W. E. Morgan_   TITLE _Assistant District Supt._   DATE _April 18, 1967_

(This space for Federal or State office use)

APPROVED BY _____   TITLE _____   DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side