

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE  
(Other instructions  
reverse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-032104

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

NONE

7. UNIT AGREEMENT NAME

NONE

8. FARM OR LEASE NAME

A. H. Blinebry NCT-4

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

Brunson South (Ellen)  
Blinebry11. 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.)

3310' (GR)

12. COUNTY OR PARISH

Lea

13. STATE

N. M.

## 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

☒  
☐  
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(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.)\*

Total Depth - 1239'

Spudded 11" Hole 8:00 A. M. May 15, 1964

Ran 1227' of 8 5/8" O. D. Casing, 24.00 LB, J-55, NEW, and cemented at 1239' with 400 Sx. Class "C" 4% gel, plus 100 Sx. Class "C" regular neat. Plug at 1215'. Cement Circulated. Job complete 8:15 P. M. May 19, 1964.

Tested 8 5/8" O. D. Casing for 30 minutes with 1000 P. S. I. from 7:45 P. M. to 8:15 P. M. May 20, 1964. Tested O. K. Drilled cement plug and re-tested for 30 minutes with 1000 P. S. I. from 9:45 P. M. to 10:15 P. M. May 20, 1964. Tested O.K. Job complete 10:15 P. M. May 20, 1964.

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

SIGNED

H. D. Raymond

TITLE Assistant District  
Superintendent

DATE May 21, 1964.

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side