WELL X

14. PERMIT NO.

16.

Regular

2. NAME OF OPERATOR

3. ADDRESS OF OPERATOR

GAS WELL

OTHER

COPY TO O.C. G

rE*

UN **ID STATES** DEPARTMENT OF THE INTERIOR (Other in verse side) GEOLOGICAL SURVEY

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.)

TEXACO Inc.

LOCATION OF WELL (Report location clearly and in accordance with any State require nents.* See also space 17 below.)

At surface

well located 660' from the West Line, and 2022' from the South Line of Section 33, T-22S, R-38E, Lea County, New Mexico.

SUBMIT IN TRIPI instructions

Form approved, Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

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-	LU = U321U4		
6.	IF INDIAN, ALLOTTEE	OR TRIBE	NAME

NONE		
101.714.64	4.1	

•			
7. UNIT AG	REEME	NT NAME	
NONE			

8. FARM OR LEASE NAME

A. H. Blinebry NCT-1 9. WELL NO.

16

s baas Rew 9 Tahrede 21 12 Tahred

10. FIELD AND POOL, OR WILDCAT South Paddock
Tubb Gas
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 33, T-22S, R-38E

12. COUNTY OR PARISH | 13. STATE

N. M.

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

P. O. Box 728 - Hobbs, New Mexico

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

NOTICE OF INTENTION TO:			SUB	SEQUEN	T REPORT OF:		
TEST WATER SHUT-OFF FRACTURE TREAT		PULL OR ALTER CASING MULTIPLE COMPLETE		WATER SHUT-OFF FRACT: RE TREATMENT	x	REPAIRING WELL.	-
SHOOT OR ACIDIZE		ABANDON*		SHOOT NG OR ACIDIZING		ABANDONMENT*	
REPAIR WELL (Other)		CHANGE PLANS		(Other) (NOTE: Report res (ompletion or Reco	ults of mpletic	multiple completion on W on Report and Log form.)	ell

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 - 1350' Spudded 12 1/4" Hole 6:00 A. M. March 20, 1964.

Ran 1340' of 8 5/8" 0. D. Casing, 24.00 LB, J-55, NEW, and cemented at 1350' with 400 Sx. Incor 4% gel, plus 200 Sx. Class "C" regular neat with 2% CaCL. Plug at 1320. Cement Circulated. Job complete 1:00 P. M. March 22, 1964.

Tested 8 5/8" 0. D. Casing for 30 minutes with 1000 P. S. I. from 4:00 A. M. to 4:30 A. M. March 23, 1964. Tested O. K. Drilled cement plug and re-tested for 30 minutes with 1000 P. S. I. from 5:00 A. M. to 5:30 A. M. March 23, 1964. Tested O. K. Job complete 5:30 A. M. March 23, 1064.

8. I hereby certify that the foregoing is true and correct		
SIGNED H. D. Raymond	TITLE Assistant D: strict Superinter dent	DATE March 24, 1964.
(This space for Federal or State office use)		
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE 4 125 1564	DATE

J. L. GORDON