

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil & Gas Division
1625 N. French Dr.
Hobbs, NM 88240

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

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

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. L.C.-032104
2. Name of Operator Texaco Exploration & Production, Inc.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P. O. Box 3109, Midland, TX 79702	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit Letter D, 660 FSL, 660' FWL Section 29, Township 22 S, Range 38 E	8. Well Name and No. A.H. Blinney Fed NCT 1 #19
	9. API Well No. 30-025-20925
	10. Field and Pool or Exploratory Area Blinney 0424 Brunson Drinkard
	11. County or Parish, State Lea, New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

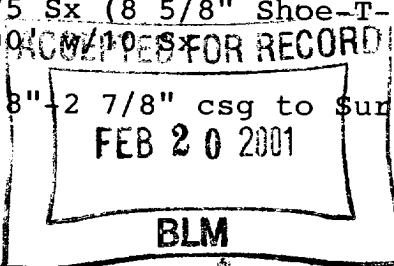
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input checked="" type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input checked="" 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"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other	<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.)*

- Set 2 7/8" CIBP @ 5625' Y-Side (Drinkard-ABO) Fill 2 7/8" Csg w/60 Sx Cmt plug 5625'-3500' Tag Cmt @ 3461'
- Set 2 7/8" CIBP @ 6100' Z-Side (Tubb) Fill 2 7/8" w/70 Sx Cmt plug 6100'-3000' Tag Cmt @ 2918'
- Perf 2 7/8" Csg on Y-Side @ 3461' Squeeze w/50 Sx Cmt plug 3461'-3300' (Queen) Tag no Cmt. Re-sqz w/50 Sx Tag Cmt @ 3236'
- Perf 2 7/8" csg on Z-Side unable to sqz spot 20 Sx plug 2763'-2400' (Yates, Base Salt) Tag Cmt @ 2080
- RIH w/Tbg on Y-Side Circ Cmt plug 3236'-Surf w/90 Sx
- Perf @ 1500' on Z-Side. Sqz 2 7/8" csg w/75 Sx (8 5/8" Shoe-T-Salt) Tag Cmt @ 1345' Re-spot Cmt plug 1345'-1200'
- Circ cmt on Z-Side plug 285'-Surf w/10 Sx
- Perf @ 75' on Y-Side Circ Cmt between 8 5/8" - 2 7/8" csg to Surf w/37 Sx
- Install dry hole marker. 2/5/01

(ORIG. SGD.) GARY GOURLEY



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

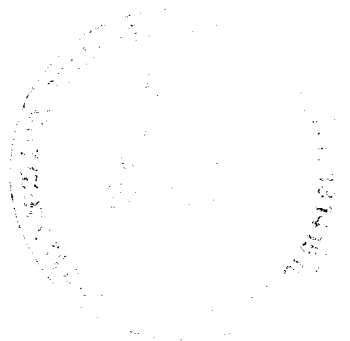
Signed Poly Alvarez Title VICE-PRESIDENT Date 2/5/01
(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any:

GWW

BLM
ROSWELL, NM
FEB 13 '01

ED



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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.

P. O. Box 3109 Midland, TX 79702 (915) 688-4438

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Unit Letter D, 660' FSL, 660' FWL
Section 29, Township 22 S, Range 38E

5. Lease Designation and Serial No.
LC-032104

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No. A.H. Blinabr
FED NCT 1 #19

9. API Well No.
30-025-20925

10. Field, Pool, or Lease Area
Brunson Drinkard

11. County or Parish, State
Lea, New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☒ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other _____
- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ 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.)*

- Set 2 7/8" CIBP @ 5625' Y-side (DRIK-ABO) Fill 2 7/8" csg. w/60 sx cmt 5625' - 3500'
- Set 2 7/8" CIBP @ 6100 Z-side (Tubb) Fill 2 7/8" csg w/115 sx cmt 6100' - 1500'
- Perf 6 holes Y-side @ 3500' sqz 50 sx cmt 3500' - 3300' (Queen) WOC Tag
- Perf 6 holes Y-side @ 2675', sqz 50 sx cmt 2675' - 2400' (Yates, base salt) WOC Tag
- Cut 2 7/8" csgs @ 1500' L/D both strings. Spot 75 sx plug 1500' - 1300' (8 5/8 shoe, T-salt) WOC Tag
- Displace hole w/salt gel mud, 9.5# brine w/25# gel P/BBL
- Spot 10 sx surf, install dry hole marker

(1500-1200) only

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

Signed GARY GOURLEY
(This is the name of the person who signed the report.)

Title FACILITY ENGR

Date 7/26/00

Approved by _____
Conditions of approval, if any:

Title PETROLEUM ENGINEER

Date AUG 21 2000

(ORIG. SGD.) GARY GOURLEY
(ORIG. SGD.) GARY GOURLEY

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.

*See Instruction on Reverse Side

GWV

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