

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on  
reverse side)

COPY TO O. C. C.

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-032104

6. IF INDIAN, ALLOTTEE OR TRUST NAME

MAR 3 1970

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

A. H. Blinebry Fed. NCT-1

9. WELL NO.

21

10. FIELD AND POOL, OR WILDCAT

Blinebry

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

Sec. 20, T-22-S, R-38-E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

## 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.)1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

TEXACO Inc.

3. ADDRESS OF OPERATOR

P. O. Box 728, Hobbs, New Mexico 88240

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

At surface

Well located 660' from the South Line and 1980' from the West  
Line of Sec. 20, T-22-S, R-38-E, Unit Letter N, Lea County,  
New Mexico.

14. PERMIT NO.

Regular

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

3400' (DF)

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 ☐

(Other) Shut in Blinebry

REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐

X

(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 perti-  
nent to this work.)\*Set Cast Iron Bridge Plug at 4750' and recomplete in  
Brunson San Andres East.

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

SIGNED

Assistant District  
TITLE Superintendent

DATE February 26, 1970

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

FEB 27 1970

\*See Instructions on Reverse Side  
U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO