Form 9-331 (May 1963) DEPAR	U. ED STATES	ERIOR (Other instruction	5. LEASE DESIGNATION	u No. 42-R1424.	
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this for the propendiated drift or to deepen or plug back to a different reservoir. (Do not use this for the propendiated drift or to deepen or plug back to a different reservoir.			LC-032104 6. if indian, allotted NONE	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
I. OIL CAS GAS OTHER				7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR TEXACO Inc.			8. FARM OR LEASE NAM	8. FARM OR LEASE NAME A. H. Blinebry NCT-1	
3. ADDRESS OF OPERATOR P. O. Box 728 - Hobbs, New Mexico			9. WELL NO.	ry NOI-L	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.			33		
See also space 17 below.) At surface			10. FIELD AND POOL, OF Tubb & Drink	Tubb & Drinkard	
Well located 660' from the North Line, and 660' from the West				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
Line of Section 28, 1	-22-S, R-38-E, Lea	County, New Mexico	Sec. 28, T-2	2-S. R-38-E	
14. PERMIT NO.	4. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)		12. COUNTY OF PARISH		
Regular	Not Ava	ilable•	Lea	N. M.	
16. Check	Appropriate Box To Indica	te Nature of Notice, Report, c	or Other Data	•	
NOTICE OF INT			SEQUENT REPORT OF:		
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	X REPAIRING W		
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CA		
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMEN	IT*	
(Other)	CHANGE PLANS	(Other)(NOTE: Report res	lts of multiple completion on Well apletion Report and Log form.)		
Sj		Depth - 1395' 5:15 P. M. November 18	3, 1965	•	
at 1395" with 1% CACL. Plug November 20, 19 Tested 8 5/8" ( to 11:15 P. M. tested for 30 r	30 Sx. Trinity Lite at 1351'. Cement ( 65. ). D. Casing for 30 November 21, 1965. inutes with 600 P.	17.28 LB, Spiral Weld e Wate, plus 100 Sx. ( Circulated. Job compl minutes with 600 P. S Tested O. K. Drille S. I. from 12:45 A. M Job complete 1:15 A.	Class "C" neat wi lete 10:45 A. M. S. I. from 10:45 D ed cement plug and I. to 1:15 A. M.	th P. M. 1 re-	
18. I hereby certify that the foregoing	10 - 11				
signed Dan Gille	ttTITLE	Assistant District	DATE Novem	per 22, 1965	
(This space for Federal or State o	lice use)	Superintendent	÷		
APPROVED BY CONDITIONS OF APPROVAL, IF	TITLE		DATE	<u> </u>	
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	*See Instructi	ions on Reverse Side	1985		

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ACTING THE MARKED CONT

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