

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other Instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1421.

5. LEASE DESIGNATION AND SERIAL NO.

LC-032104

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

A.H. Blinebry Fed. NCT-1

9. WELL NO.

37

10. FIELD AND POOL, OR WILDCAT

Drinkard

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

20-22S-38E

12. COUNTY OR PARISH 13. STATE

Lea

NM

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

Unit letter A, 660 feet from the North line and 990 feet from  
The East line.

14. PERMIT NO.

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

3404' DF

16.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETION

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON\*

SHOOTING OR ACIDIZING

ABANDONMENT\*

REPAIR WELL

CHANGE PLANS

(Other)

(Other) Extension Request

(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.)\*

REMARKS

1. WELL STATUS - Shut In Oil
2. TEMPORARY ABANDONMENT DATE - October, 1966
3. REASON FOR ABANDONMENT - Not profitable to operate.

4. FUTURE PLANS - Hold for Secondary Recovery.

5. DATE OF FUTURE WORKOVER OR PLUGGING - 1977

NOV 1 1976

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

SIGNED

TITLE Asst. Dist. Supt.

DATE 10-7-75

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

OCT 10 1975

JIM SIMS

ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side