

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
SUBMIT IN TRIPLICATE
(Other instructions on reverse side)
83240

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Texaco Inc.	8. FARM OR LEASE NAME A.H. Blinebry Federal
3. ADDRESS OF OPERATOR P. O. Box 728, Hobbs, NM 88240	9. WELL NO. 38
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit Letter J, 1980 FSL & 1980 FEL	10. FIELD AND POOL, OR WILDCAT Blinebry Oil & Gas Drinkard Wantz Granite Wash
14. PERMIT NO. 30-025-25106	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 19, T22S, R38E
15. ELEVATIONS (Show whether DF, HT, GR, etc.) 3360' GR	12. COUNTY OR PARISH 13. STATE

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>	Downhole Commingling	<input checked="" type="checkbox"/>

(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.)*

Downhole commingled Blinebry Oil & Gas, Drinkard, and Wantz Granite Wash Oil Zones.

- 1) Pulled rods, pump, installed BPO and pulled tubing.
- 2) TIH w/workstring and 6 1/8" bit. Drilled out CIBP.
- 3) Clean out hole to 7453'.
- 4) Ran production equipment.
- 5) Downhole commingle Blinebry Oil & Gas, Drinkard, and Wantz Granite Wash as per DHC-620, pumping September 15, 1986.
- 6) 24 hr test. Pumping 49°/69°/159^{mcf}, September 22, 1986

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

SIGNED [Signature] TITLE District Admin. Supervisor DATE 09/26/86

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
OCT 03 1986

*See Instructions on Reverse Side