

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE
(Other instructions on reverse side)

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 GAS WELL OTHER

2. NAME OF OPERATOR
Texaco Producing, Inc.

3. ADDRESS OF OPERATOR
P. O. Box 728, Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
660' FSL & 660' FEL

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.
40

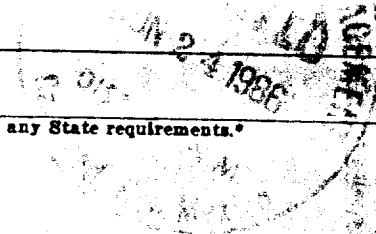
10. FIELD AND POOL, OR WILDCAT
Blinebry Oil and Gas

11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA
Sec 19, T22S, R38E

12. COUNTY OR PARISH 13. STATE
Lea NM

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)
3374' G.L.



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"/>	

SUBSEQUENT REPORT OF:

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

- 1) MIRU. TOH w/prod. Equipment.
- 2) Set 7" CIBP @ 6289, capped w/20' cmt. new PBTD 6269'.
- 3) Perf 7" csg w/4" csg gun at 5492, 94, 5505, 12, 21, 26, 41, 49, 69, 76, 86, 90, 96, 5602, 07, 10, 46, 54, 58, 62, 65, 78, 88, 5703, 09, 15, 26, 38, 44, 52, 58, 67, 70, 82, 92, 5800, 07, 29, 40, 49, 54, 58, 75, 5907, 11, 17, 26, 38, 44 & 5984. 2SPI 51 shots (102 holes).
- 4) Acidize perms w/9200 gals 15% NEFE and 1600 lb. rock salt in three equal stages.
- 5) Frac perms with 93,000 gals 40# gelled X-linked wtr, containing lppg to 6ppg 20/40 sand (252,000lb) in three equal stages.
- 6) Checked for fill and cleaned out.
- 7) TIH with production equipment.
- 8) Blinebry oil and gas zone tested may 30, 1986 pumping 24 hr 36°/43°W/4361^{gor}, 37.7° API.

ACCEPTED FOR RECORD

[Signature]
JUN 30 1986

18. I hereby certify that the foregoing is true and correct
SIGNED *[Signature]* TITLE District Admin. Supervisor DATE 06/18/86
(This space for Federal or State office use)

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

*See Instructions on Reverse Side

10
11
12

RECEIVED
JUL 2 1986
C.D.D.
HOBBY OFFICE