| (June 1990) DEPART                                                                                                                                                          | UNITED STATES<br>MENT OF THE INTERIOR<br>OF LAND MANAGEMENT<br>APR + 4                                                                                                                                                                                                                                                             | N.M. OIL CONS.<br>BOX 1980<br>HOBBS, NEW MEXICO 88240<br>FORM APPROVED<br>DBudget Bureau No. 1004-0135<br>Expires: March 31, 1993                                                                                                                                                                           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| APH - 9<br>SUNDRY NOTICES AND REPORTS ON WELLS $E_{U_{1} \in \mathcal{A}}$<br>Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. |                                                                                                                                                                                                                                                                                                                                    | LC 032104                                                                                                                                                                                                                                                                                                   |
| Use "APPLICATION FOR PERMIT " for such proposals                                                                                                                            |                                                                                                                                                                                                                                                                                                                                    | 6. If Inglian, Alottee or Tribe Name                                                                                                                                                                                                                                                                        |
| SL                                                                                                                                                                          | IBMIT IN TRIPLICATE                                                                                                                                                                                                                                                                                                                | 7. If Unit or CA, Agreement Designation                                                                                                                                                                                                                                                                     |
| 1. Type of Well: OIL GAS WELL GAS                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                    | 8. Well Name and Number<br>BLINEBRY, A. H. FEDERAL NCT-1                                                                                                                                                                                                                                                    |
| 2. Name of Operator<br>TEXACO EXPL                                                                                                                                          | ORATION & PRODUCTION INC.                                                                                                                                                                                                                                                                                                          | 43                                                                                                                                                                                                                                                                                                          |
| · · · · · · · · · · · · · · · · · · ·                                                                                                                                       | HOBBS, NM 88240/ 397-0426                                                                                                                                                                                                                                                                                                          | 9. API Well No.<br>30 025 29353                                                                                                                                                                                                                                                                             |
| 4. Location of Well (Footage, Sec., T., R., M., or Su<br>Unit Letter <u>E</u> : 1980 Feet From                                                                              | rvey Description)<br>n The <u>NORTH</u> Line and <u>450</u> Feet From The                                                                                                                                                                                                                                                          | 10. Field and Pool, Exploratory Area<br>BRUNSON DRINKARD - ABO, SOUTH                                                                                                                                                                                                                                       |
| WEST Line Section 33                                                                                                                                                        | Township 22S Range 38E                                                                                                                                                                                                                                                                                                             | 11. County or Parish, State<br>LEA , NEW MEXICO                                                                                                                                                                                                                                                             |
| <sup>12.</sup> Check Appropria                                                                                                                                              | ate Box(s) To Indicate Nature of Notice,                                                                                                                                                                                                                                                                                           | Report, or Other Data                                                                                                                                                                                                                                                                                       |
| directionally drilled, give subsurface locations a<br>Texaco Exploration and Production Inc. respe                                                                          | Abandonment  Recompletion  Plugging Back Casing Repair Altering Casing OTHER:  Clearly state all pertinent details, and give pertinent dates, includ nd measured and true vertical depths for all markers and zones ctfully submits it's plans concerning notice AJM-052-95. In the South Brunson Drinkard - Abo formation 3/4/95. | Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Note: Report results of matiple completion on West Completion or Recompletion Report and Log Form.)  Ifing estimated date of starting any proposed work. If well is pertinent to this work.)*. |
| V                                                                                                                                                                           | Engineering Assistant<br>Ell J. Carriger                                                                                                                                                                                                                                                                                           | DATE3/29/95                                                                                                                                                                                                                                                                                                 |
| (This space for Federal or State office use)<br>APPROVED BY<br>CONDITIONS OF APPROVAL, IF ANY:                                                                              | TITLE                                                                                                                                                                                                                                                                                                                              | DATE                                                                                                                                                                                                                                                                                                        |
| Title 18 U.S.C. Section 1001, makes it a crime for any per<br>representations as to any matter within its jurisdiction.                                                     | son knowingly and willfully to make to any department or agency of the U                                                                                                                                                                                                                                                           | Inited States any false, fictitious or fraudulent statements or                                                                                                                                                                                                                                             |

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