Form 3160-5 (June 1990)

# UNITED STATES DEPARTMENT OF THE INTERIOR 1625 N. French Dr. BUREAU OF LAND MANAGEMENT Hobbs, NM 88240

FORM APPROVED

Budget Bureau No. 1004-0135

5/8/98

DATE

DATE

DONEAG OF	Expires: March 31, 1993  5. Lease Designation and Serial No.  LC032104			
SUNDRY NOTICE				
Do not use this form for proposals to				
, .	FOR PERMIT" for such proposals	6. If Indian, Alottee or Tribe Name		
SUBM	7. If Unit or CA, Agreement Designation			
1. Type of Well: OIL GAS	OTHER	8. Well Name and Number		
WELL WELL	BLINEBRY, A. H. FEDERAL NCT-1			
2. Name of Operator TEXACO EXPLOR	44			
3. Address and Telephone No. 205 E. Bender, HC	DBBS, NM 88240 397-0405	9. API Well No.		
4. Location of Well (Footage, Sec., T., R., M., or Survey	Description)	30 025 30042  10. Field and Pool, Exploaratory Area		
Unit Letter F : 1980 Feet From T	BRUNSON DRINKARD - ABO, SOUTH			
MITOT II Couling 20 Township 200 Dames 200		11. County or Parish, State		
WEST Line Section 33	Township 22S Range 38E	LEA , NEW MEXICO		
12. Check Appropriate	Box(s) To Indicate Nature of Notice, R	eport, or Other Data		
TYPE OF SUBMISSION	. т	YPE OF ACTION		
	Abandonment	Change of Plans		
	Recompletion	New Construction		
Notice of Intent	Plugging Back	Non-Routine Fracturing		
Subsequent Report	Casing Repair	Water Shut-Off		
Final Abandonment Notice	Atlering Casing Conversion to Injection			
•	✓ OTHER: CASING INTEGRITY			
		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)		
<ol> <li>Describe Proposed or Completed Operations (Clear directionally drilled, give subsurface locations and n</li> </ol>	rly state all pertinent details, and give pertinent dates, including neasured and true vertical depths for all markers and zones per	estimated date of starting any proposed work. If well is tinent to this work,)*.		
5-01-98				
1. NOTIFIED BLM. CIBP SET @ 6383'. DUM 2. TESTED CSG TO 500# FOR 30 MIN. HEL				
(ORIGINAL CHART OR COPY OF CHART ON	BACK)			
the original char	t was sent in with this report on 5-8-98. A copy of the	chart is attached		
	date of this report is 2-22-00.	onart is attached		
		MAR - 8 2000		
1	<u>[CAI</u>	RLSBAD, NEW MEXICO		
	0 (			

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

J. Denise Leake

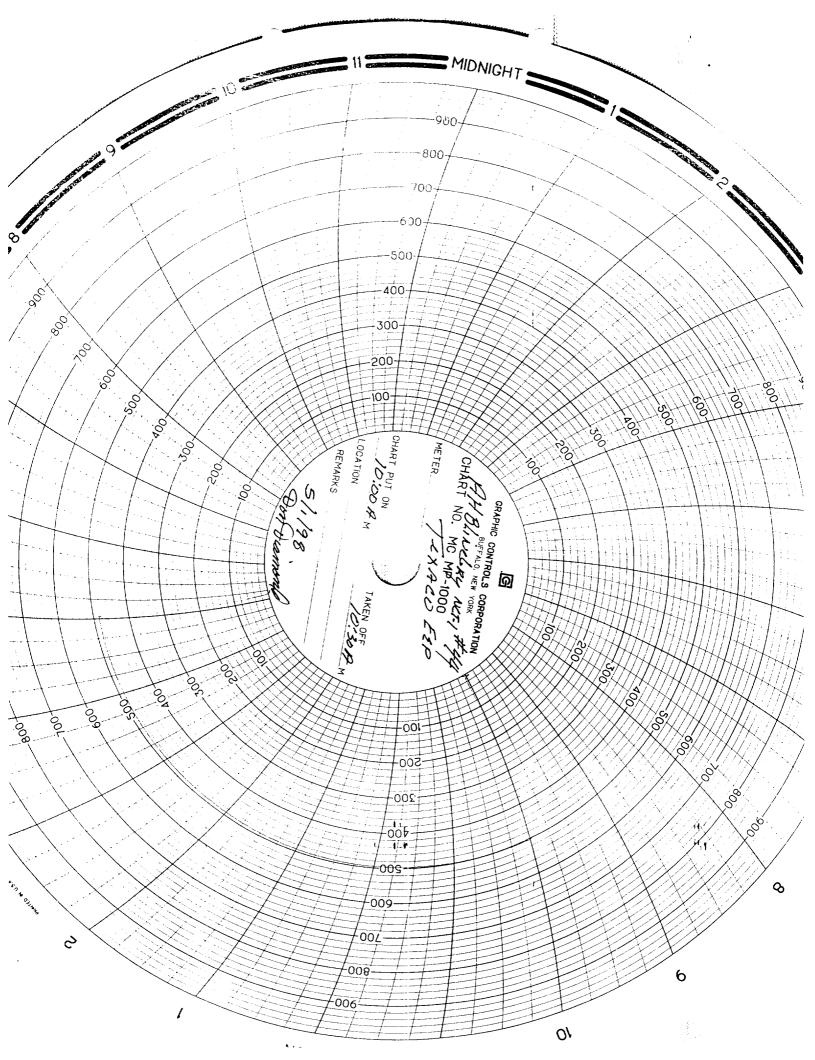
TITLE Engineering Assistant

**APPROVED** 

TYPE OR PRINT NAME

(This space for Federal or State office use)

**BUNDITIONS OF APPROVAL, IF ANY:** 



A.H. Blineby Net 1 #44 5-1-98 Ry 146

Dawson Ris Supervisor

Mylogue

218 p Set & 6383, Tump 35' cmr on Class

Circ Fales Elnig.

## BLM COP+

Number	AJM-094-00			
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### **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

#### Identification ΠD NMLC032104 Lease CA NOTICE OF INCIDENTS OF NONCOMPLIANCE Unit

Hand Delivered Received

Receipt Requested Z 260 099 977

Certified Mail - Return

Operator Bureau of Land Management Office **TEXACO EXPLORATION & PROD INC** HOBBS INSPECTION OFFICE Address 205 EAST BENDER Address 414 WEST TAYLOR **HOBBS NM 88240 HOBBS NM 88240** Attention Telephone JOHN AYERS 505.393.3612 Atto Addr P O BOX 730 Inspector **HOBBS NM 88240** Andrea Massengill 1/4 1/4 Meridian Section Well or Facility Township Range Site Name SENW **NMP** 38E **22S** AH BLINEBRY 1 THE FOLLOWING VIOLATION WAS FOUND BY BUREAU OF LAND MANAGEMENT INSPECTORS ON THE DATE AND AT THE SITE LISTED ABOVE Gravity of Violation Violation Time (24 - hour clock) Date 43 CFR 3162.3-4(c) MINOR 01/14/2000 Corrective Action To Be Completed By Assessment Reference Assessment for Noncompliance Date Corrected 43 CFR 3163.1() 02/09/2000

Remarks

Well is temporary abandoned (TA/SI) without approval. Well must be put on production, plugged and abandoned or approved for TA status. Submit a notice of intent to produce, plug or request TA status on a 3160-5 (Sundry Notice), one original and five copies to this office. For TA requests, respond to the attached TA justification requirements.

When violation is corrected, sign this potice and return to above address.  Company Representative Title Mg. Asst.	Signature J. Henrie Stake Date 2-22-00
Company Comments	

WARNING

Incidents of Noncompliance correction and reporting timeframes begin upon receipt of this Notice or 7 business days after the date it is mailed, whichever is earlier. Each violation must be corrected within the prescribed time from receipt of this Notice and reported to the Bureau of Land Management office at the earliers shown above. Please note that you already may have been assessed for noncompliance (see amount under "Assessment for Noncompliance"). If you do not comply as noted above under "Corrective Action To Be Completed By" you may incur an additional assessment under (43 CFR 3163.1) and may also incur Civil Penalties (43 CFR 3163.2). All self-certified corrections must be postmarked no later than the next business day after the prescribed time for correction.

Section 109(d)(1) of the Federal Oil and Gas Royalty Management Act of 1982, as implemented by the applicable provisions of the operating regulations at Title 43 CFR 3163.2(f)(1), provides that any person who "knowingly or willfully" prepares, maintains, or submits, false, inaccurate, or misleading reports, notices, affidavits, record, data, or other written information required by this part shall be liable for a civil penalty of up to \$25,000 per violation for each day such violation continues, not to exceed a maximum of 20 days.

### REVIEW AND APPEAL RIGHTS

A person contesting a violation shall request a State Director review of the Incidents of Noncompliance. This request must be filed within 20 working days of receipt of the Incidents of Noncompliance with the appropriate State Director (see 43 CFR 3165.3). The State Director review decision may be appealed to the Interior Board of Lands Appeals, 4015 Wilson Blvd., Arlington VA 22203 (see 43 CFR 3165.4). Contact the above listed Bureau of Land Management office

for further information.					
Signature of Bureau of and	Management Authorized Office	er		Date 1-14-00	Time /000
1////	1 1111	FOR OFFICE USE	ONLY		
Number	Date	Assessment	Penalty	Termin	ation
53					
Type of Inspection					
Pl					<del></del>

