(June 1990) DEPART	JNITED STATES MENT OF THE INTERIOR OF LAND MANAGEMENT	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993
Do not use this form for proposa	CES AND REPORTS ON WELLS s to drill or to deepen or reentry to a different reservoir. IN FOR PERMIT" for such proposals	5. Lease Designation and Serial No. LC032104 6. If Indian, Alottee or Tribe Name
SL	BMIT IN TRIPLICATE	7. If Unit or CA, Agreement Designation
1. Type of Well: OIL GAS WELL GAS	OTHER	8. Well Name and Number BLINEBRY, A. H. FEDERAL NCT-1
2. Name of Operator TEXACO EXPL	DRATION & PRODUCTION INC.	44
3. Address and Telephone No. 205 E. Bender,	10BBS, NM 88240 397-0405	9. API Well No. 30 025 30042
4. Location of Well (Footage, Sec., T., R., M., o Unit Letter F : 1980 Feet From	r Survey Description) The NORTH Line and 1700 Feet From The	10. Field and Pool, Exploaratory Area BRUNSON DRINKARD - ABO, SOUTH
WEST Line Section 33	Township 22S Range 38E	11. County or Parish, State LEA , NEW MEXICO
12. Check Appropria	te Box(s) To Indicate Nature of Notice, Re	eport, or Other Data
TYPE OF SUBMISSION	, Т	YPE OF ACTION
 Notice of Intent Subsequent Report Final Abandonment Notice 	Abandonment Recompletion Plugging Back Casing Repair Atlering Casing OTHER: CASING INTEGRITY	Change of Plans Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection TEST Uispose Water (Note: Report results of multiple completion on Well Completion on Export and Log Form.)

13. 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,)*.

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5-01-98

1. NOTIFIED BLM. CIBP SET @ 6383'. DUMP 35' CMT ON CIBP. 2. TESTED CSG TO 500# FOR 30 MIN. HELD OK.

14. I hereby certify that the foregoing is true and forect SIGNATURE	MichalleripLe Engineering Assistant J. Denise Leake	DATE 5/8/98
(This space for Federal or State office use)		
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE
Title 18 U.S.C. Section 1001, makes it a crime for representations as to any matter within its jurisdic	any person knowingly and willfully to make to any department or agency of the tion.	United States any false, fictitious or fraudulent statements or
		DeSato/Nichols 12-93 ver 1.0



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3. Address and Telephone No. 205 E. Bender, HC	BBS, NM 88240 397-0405	9. API Well No.
4. Location of Well (Footage, Sec., T., R., M., or S Unit Letter F : 1980 Feet From T	urvey Description) he NORTH Line and <u>1700</u> Feet From The	10. Field and Pool, Exploaratory Area BRUNSON DRINKARD - ABO, SOUTH
WEST Line Section 33	Township <u>22S</u> Range <u>38E</u>	11. County or Parish, State LEA , NEW MEXICO
12. Check Appropriate	Box(s) To Indicate Nature of Notice, Re	eport, or Other Data
TYPE OF SUBMISSION	רד	YPE OF ACTION
 Notice of Intent Subsequent Report Final Abandonment Notice 	 Abandonment Recompletion Plugging Back Casing Repair Atlering Casing OTHER: CASING INTEGRITY 1 	Change of Plans Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection TEST Dispose Water (Note: Report results of multiple completion on Weil

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14. I hereby certify that the foregoing is true and forect SIGNATURE	Denise Leake	DATE	5/8/98
(This space for Federal or State office use)			
APPROVED BY		DATE	
CONDITIONS OF APPROVAL, IF ANY:			
Title 18 U.S.C. Section 1001, makes it a crime for an representations as to any matter within its jurisdiction	ny person knowingly and willfully to make to any department or agency of the United St n.	ates any false, fictitious or fraudulent statement:	s or



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2. Name of Operator TEXACO EXPLOR.		44
3. Address and Telephone No. 205 E. Bender, HO	·	9. API Well No. 30 025 30042
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WEST Line Section 33	Township 22S Range 38E	11. County or Parish, State LEA , NEW MEXICO
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TYPE OF SUBMISSION	. ТҮ	PE OF ACTION
 Notice of Intent Subsequent Report Final Abandonment Notice 	 Abandonment Recompletion Plugging Back Casing Repair Atlering Casing OTHER: CASING INTEGRITY T 	Change of Plans Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection EST (Note: Report results of multiple completion on Well Completion or Report and Log Form.)

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14. I hereby certify that the foregoing is true and fore SIGNATURE		Engineering Assistant	DATE	5/8/98
TYPE OR PRINT NAME	J. Denise Leake			
(This space for Federal or State office use)				
APPROVED BY	TITLE		DATE	
CONDITIONS OF APPROVAL, IF ANY:				
Title 18 U.S.C. Section 1001, makes it a crime for representations as to any matter within its jurisd		ke to any department or agency of the United States	any false, fictitious or fraudulent state	ments or



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^{12.} Check Appropriate	Box(s) To Indicate Nature of Notice, Re	eport, or Other Data
TYPE OF SUBMISSION	, ת	PE OF ACTION
 Notice of Intent Subsequent Report Final Abandonment Notice 	 Abandonment Recompletion Plugging Back Casing Repair Atlering Casing OTHER: CASING INTEGRITY 1 	Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection TEST (Note: Report results of multiple completion on Wetl Completion or Recompletion Report and Log Form.)

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	Denise Leake	
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE
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		D-C



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TYPE OF SUBMISSION	ר , ד	PE OF ACTION
	Abandonment Recompletion	Change of PlansNew Construction
Notice of Intent	Plugging Back	Non-Routine Fracturing
Subsequent Report	Casing Repair	Water Shut-Off
Final Abandonment Notice	Atlering Casing	Conversion to Injection
		EST Dispose Water
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TYPE OR PRINT NAME	J. Denise Leake		
(This space for Federal or State office use)			
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE	
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