Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR

N.M. UIL CONS. COMMISSION P.O. BC 1980

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FORM APPROVED				

BUREAU OF LAND MANAGEMENT	Budget Bureau No. 1004-0135 Expires: March 31, 1993
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.	5. Lease Designation and Serial No. LC-032104
Use "APPLICATION FOR PERMIT" for such proposals	6. If Indian, Alottee or Tribe Name
SUBMIT IN TRIPLICATE	7. If Unit or CA, Agreement Designation
. Type of Well: OIL GAS OTHER	8. Well Name and Number BLINEBRY, A.H. FEDERAL NCT-1
P. Name of Operator TEXACO EXPLORATION & PRODUCTION INC.	47
. Address and Telephone No. P.O. Box 46510, Denver Colorado 80201-6510 (303)621-485	
Location of Well (Footage, Sec., T., R., M., or Survey Description)	30-025-32675
Unit Letter M : 800 Feet From The SOUTH Line and 500 Feet From The	10. Field and Pool, Exploaratory Area SOUTH BRUNSON DRINKARD-ABO; TUBB OIL & GA
NEST Line Section 28 Township 22-S Range 38-E	11. County or Parish, State LEA , NM
Check Appropriate Box(s) To Indicate Nature of Notice, R	Report, or Other Data
TYPE OF SUBMISSION	TYPE OF ACTION
Abandonment	Change of Plans
Notice of Intent	New Construction
Plugging Back Subsequent Report	Non-Routine Fracturing
Casing Repair	Water Shut-Off
Final Abandonment Notice	Conversion to Injection
U OTHER: SPUD,SURF.CSG,PRO	DD.CSG Dispose Water
	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)
SESE	10-12-94.). F/B 250 SACKS CLASS C W/ 2% CACL2 (14.8) TO 11:00 AM 10-13-94. 700'. PULLED GR-DSN TO SURFACE. TC CASING SET @ 7700'.
4. Thereby certify that the foregoing instrue and correct	15.11
SIGNATURE C. F. DUSHAM JANH TITLE Drilling Operations Mgr.	DATE11/3/94

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.

TITLE

C. P. Basham

TYPE OR PRINT NAME (This space for Federal or State office use)

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY