Form 9-331 (May 1963)	DEPART	UN ED STATES AEIN I OF THE INTE GEOLOGICAL SURVEY.		\TE+ re-	5. LEASE DESIGNATION A	u No. 42-R1424. and serial no.
SUNDRY NOTICES AND REPORTS, ON WELLS (Do not use this form for proposals to define the defined of the base to a different reservoir. Use "APPLICATION FOR FERMIT" for such proposals.)					6. IF INDIAN, ALLOTTEE OR TRIBE NAME None	
					7. UNIT AGREEMENT NAME NONG	
WELL WELL OTHER					8. FARM OR LEASE NAME	
TEXACO Inc.					E.E. Blinebry b NCT-2	
3. ADDRESS OF OPERATOR					9. WELL NO.	
	Box 728 - H	2 10. FIELD AND POOL, OR WILDCAT				
4. LOCATION OF WE See also space 1 At surface	LL (Report location c 7 below.)	Langlie-Mattix				
	1 1980' from tion 26, T-23	11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA				
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)					Sec. 26. T-23. 12. COUNTY OB PARISH	-5, <u>R-5/-E</u> 13. STATE
Regular		3253			Lea	N.M.
16.			Nature of Notice, Repor	O	that Data	· · ·
	•				ENT REPORT OF:	
	NOTICE OF INTEN	TION TO:		1000000	<u>،</u> ۱	
TEST WATER SI		PULL OR ALTER CASING	WATER SHUT-OFF		REPAIRING W	
FRACTURE TREA		ABANDON* X	FRACTURE TREATMEN SHOOTING OR ACIDIZI		ALTERING CA ABANDONMEN	
SHOOT OR ACID Repair W e ll		CHANGE PLANS	(Other)			
(Other)			(Note: Report Completion or	results Recomple	of multiple completion of tion Report and Log for	m.)
proposed wor nent to this w	v. If well is direction ork.) *	ct well in as foll	nent details, and give pertinen ocations and measured and tru	e vertica	i depths for all markers	and sones perti-
I. Capacity	y of well is	approximately Bb	l oll per day whic	h Is	uneconomical to	o produce.
2. No reme recover		exists; however,	the well is in a	prosp	ective seconda	ry
operati	ons a <mark>re</mark> possi	ect well in as une ble. This proposa terior-Geological	conomical to produ I subject to appro Survey.	ce un val o	til secondary f the United S	recovery tates
						· •
						•
18 I hereby certif	that the faregoing	s true and correct				<u> </u>
18. I hereby certify that the surgeoing is true and correct SIGNED TITLE Asst. Dist. Supt.					DATTE Febru	ary 23,1967
SIGNEDJ	.G. Blevins,	J. TITLE_	ASSI DIST. Supre		DATE	
(This space for	r Federal or State off	(cr use)		- 1		
APPROVED B CONDITIONS	Y OF APPROVAL, IF .	ANY :		3	DATR	<u> </u>
		*Saa lastaat	ions on Reverse Side			

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See Instructions on Rev

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