

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions
reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐		5. LEASE DESIGNATION AND SERIAL NO. NM 80 - 014218
2. NAME OF OPERATOR TEXACO INC.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 728 HOBBS, NM 88240		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface UNIT LETTER D, 660' FNL, 2310' FEL SEC 35 T24S R37E		8. FARM OR LEASE NAME CC FRISTOE B' NCT-2 Federal
14. PERMIT NO. 30-025-23466		9. WELL NO. 14
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 3183 DF		10. FIELD AND POOL, OR WILDCAT JUSTIS BLINERBY
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC. 35 T24S R37E
		12. COUNTY OR PARISH LEA
		13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☒	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) ☐	
(Other) ☐		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. 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.)

COMMENCED WORK 6-15-88

- MTRU PULLING UNIT, TOH W/ RODS AND PRODUCTION TGB

- TTH W/ 4 1/2" MOD R PER ON 2 3/8" TGB, SET PKR @ 4995', TESTED BACKSIDE TO 500 PSI

- ACIDIZED BLINERBY PERFS 5066' TO 5681' W/ 3000 GAL 15% NFFE ACID IN 3 STAGES
USING 500' RS BETWEEN STAGES. AL 4 BPM, ISIP 100", MAX P. 1000"

- SWABBED 1HR RECOVERED 53 BBL FLUID (30% OIL)

- SCALE TREAT PERFS 5066 TO 5681 W/ 2 DRUMS SP-237, FLUSHED W/ 125 BBLs KCL

- TOH W/ PKR & TGB

- TTH W/ PROD. TGB, PUMP, AND RODS

PLACED WELL ON PRODUCTION

24HR POTENTIAL TEST ENDING 6-26-88

RECOVERED 61 BNO, 75 BFW, 371 MCFD

18. I hereby certify that the foregoing is true and correct

SIGNED H. L. Johnson TITLE Area Supt DATE 6/29/88
(This space for Federal or State office use) C. R. Mendenhall

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

SJS