(June 1990) DEPART	JNITED STATES MENT OF THE INTERIOR OF LAND MANAGEMENT	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993	
SUNDRY NOT Do not use this form for proposa Use "APPLICATIO	5. Lease Designation and Serial No. NM 14218 6. If Indian, Alottee or Tribe Name		
1. Type of Well:	7. If Unit or CA, Agreement Designation 8. Well Name and Number		
2. Name of Operator TEXACO EXPL		C. C. FRISTOE 'B' FEDERAL NCT-2 22	
<ol> <li>Address and Telephone No. 205 E. Bender,</li> <li>Location of Well (Footage, Sec., T., R., M.,</li> <li>Unit Letter J 1575 Feet From</li> <li>EAST Line Section 26</li> </ol>	9. API Well No. 30-025-34054 10. Field and Pool, Exploaratory Area JUSTIS: BLINEBRY, TUBB-DRINKARD 11. County or Parish, State LEA , NM		
TYPE OF SUBMISSION          Notice of Intent         Subsequent Report         Final Abandonment Notice	Abandonment Recompletion Plugging Back Casing Repair Atlering Casing S OTHER: DHC Percentage S	YPE OF ACTION         Change of Plans         New Construction         Non-Routine Fracturing         Water Shut-Off         Conversion to Injection         plits         (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)	
work. If well is directionally drilled, give su This is a representative sample from the C.C		all markers and zones pertinent to this work,)*.	

14. I hereby certify that the foregoing is true SIGNATURE	and correct		Engineering Assistant	DATE	10/13/97
TYPE OR PRINT NAME	Paula S. Ives				
(This space for Federal or State office use)					
APPROVED BY	······································	TITLE		DATE	<u> </u>
CONDITIONS OF APPROVAL, IF	ANY:				
Title 18 U S.C. Section 1001, makes it representations as to any matter within		d willful y to ma	ike to any department or agency of the United States a	any false, fictitious or fraudulent stat	ements or