

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRII ATE\*  
(Other instruction. n re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.

LC-030174-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

None

7. UNIT AGREEMENT NAME

None

8. FARM OR LEASE NAME  
W. H. Rhodes "B"  
Federal NCT-1

9. WELL NO.

12

10. FIELD AND POOL, OR WILDCAT

Rhodes

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 26, T-26-S, R-37-E

12. COUNTY OR PARISH 13. STATE

Lea

New Mexico

## 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. NAME OF OPERATOR TEXACO Inc.	
3. ADDRESS OF OPERATOR P. O. Box 728 Hobbs, New Mexico 88240	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Well located 660' from the South line, and 1980' from the East line of Section 26, T-26-S, R-37-E, Lea County, New Mexico	
14. PERMIT NO. Regular	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3006' (DF)

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.)\*

The following work has been completed on subject well:

1. Pulled rods and tubing and clean out hole.
2. Set packer at 3043'.
3. Treated open hole 3093' to 3272' with 1000 gals 15% NEA followed by 3000 gals gelled brine water followed by 6000 gals gelled brine water with 1/2# 10-20 sand/gal followed by 6000 gals gelled brine water w/1 1/2# 10-20 sand/gal followed by 300# rock salt plug followed with 1000 gals 15% NEA followed with 3000 gals gelled brine water followed with 6000 gals gelled brine water with 1/2# 10-20 sand/gal followed w/6000 gals gelled brine water w/1 1/2# 10-20 sand/gal.
4. Run rods and pump, recover load and place well on production.

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

SIGNED

Assistant District

TITLE

Superintendent

DATE

April 11, 1968

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: