

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIP
(Other instruction
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" 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

1. OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

TEXACO Inc.

3. ADDRESS OF OPERATOR

P. O. Box 728 - Hobbs, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surfaceWell located 660' from the South Line, and 1980' from the
East Line of Section 26, T-26-S, R-37-E, Lea County, N. M.

14. PERMIT NO.

Regular

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3006' (D. F.)

12. COUNTY OR PARISH

Lea

13. STATE

N. M.

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 COMPLETION

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.)*

We propose to do the following work on subject well:

1. Pull tubing, and clean out to total depth of 3280' with air equipment.
2. Run gamma ray-neutron log from surface to total Depth.
3. Gravel pack a slotted 4" flush joint liner over open hole section, liner to be set on bottom, no hanger, and should extend approx. 20' up inside 5 1/2" casing. Pour gravel from surface, and jet liner down through gravel with air. Move air equipment, move in pulling unit to acidize.
4. Acidize with 2500 gals 15% NE acid. Swab well.
5. Test, return well to production.

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

SIGNED

H. D. Raymond

TITLE

Assistant District
Superintendent

DATE October 9, 1964

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED
OCT 19 1964A. R. BROWN
DISTRICT ENGINEER

*See Instructions on Reverse Side