

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYCOPY TO O. C. C.
SUBMIT IN TRIPLICATE
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1424.

1. LEASE DESIGNATION AND SERIAL NO.

LC 030176 (b)
2. IF INDIAN, ALLOTTEE OR TRIBE NAME

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	7. UNIT AGREEMENT NAME Rhodes Gas Storage Unit
2. NAME OF OPERATOR El Paso Natural Gas Co.	8. FARM OR LEASE NAME Cagle "B"
3. ADDRESS OF OPERATOR 1800 Wilco Building	9. WELL NO. 2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. * See also space 17 below.) At surface Unit M, Sec 15, T-26-S, R-37-E	10. FIELD AND POOL, OR WILDCAT Rhodes Yates-7R
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 15, T-26-S, R-37-E
15. ELEVATIONS (Show whether DE, RT, GR, etc.) 2999' GL	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	☒
FRACTURE TREAT	☐	MULTIPLE COMPLETION	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐
REPAIR WELL	☒	CHANGE PLANS	☐
(Other)	☐		

WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
(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.) *

1. RUPU and clean out to original COTD w/bit.
2. Run liner to COTD.
3. Perforate liner in Yates-7R.

RECEIVED
SEP 13 1979U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

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

SIGNED *J. J. Lutz*
(This space for Federal or State office use)

TITLE Production Engineer

DATE 9/12/79

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED
SEP 13 1979
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

RECEIVED
JAN 10 1964
U.S. AIR FORCE

RECEIVED
SEP 1 1963
O.C.D. HQ-889, OFFICE

44-38861-1000
100-1000000000
100-1000000000
100-1000000000