

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY  
WASHINGTON, D. C.SUBMIT IN TRIPLICATE  
(Other instructions on reverse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-030174-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

NONE

7. UNIT AGREEMENT NAME

NONE

8. FARM OR LEASE NAME

W. H. Rhodes "A"

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

Rhodes

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

Sec. 22, T-26-S, R-37-E

14. PERMIT NO.

Regular

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

2991' (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 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.)\*

We propose to do the following workover on subject well:

1. Pull rods and tubing, and clean out well to a total depth of 3250'.
2. Run 200' of 4" flush joint slotted liner to total depth, and gravel pack.
3. Run tubing to bottom of liner with seating nipple at approximately 3240'. Slotted interval to be from 3170' to 3250'.
4. Acidize with 1000 gallons 15% NE acid from 3170' to 3250'.
5. Re-run pump equipment, recover load, Test, and place well on production.

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

SIGNED

J. G. Blevins, Jr.

TITLE Assistant District

DATE

March 17, 1966

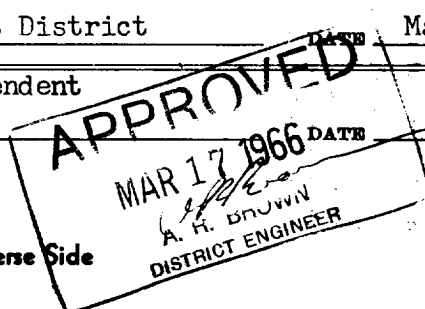
(This space for Federal or State office use)

Superintendent

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE



\*See Instructions on Reverse Side