

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☒ gas well ☐ other ☐
2. NAME OF OPERATOR
TEXACO Inc.
3. ADDRESS OF OPERATOR
P. O. Box 728, Hobbs, New Mex. 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FSL & 660' FWL
AT TOP PROD. INTERVAL: (Unit Letter 'M')
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

- ☒
☐
☐
☐
☐
☐
☐
☐
☐

5. LEASE
LC-030174-b
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
-
7. UNIT AGREEMENT NAME
-
8. FARM OR LEASE NAME
W.H. Rhodes 'B' Fed. Nct-1
9. WELL NO.
8
10. FIELD OR WILDCAT NAME
Rhodes Yates
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 26, T-26-S, R-37-E
12. COUNTY OR PARISH
Lea
13. STATE
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
2992' (DF)

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

RECEIVED

FEB 27 1981

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

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. Rigged up. Pulled rods & tubing.
2. Clean out to 3267' (TD).
3. Set pkr. @ 3010'. Acidize 4" Csg Slots 3128'-3267' w/2000 gals. 15% NEFE Acid in 2-stages using 500# Rock Salt between stages.
4. Frac w/18,000 gals. gelled 2% KCl water & 18,000 gals. liquid CO₂ in 3-stages using 6000# 100 mesh sand, 18,000# 20/40 sand & 24,000# 10/20 sand.
5. Install production equipment. On 24 Hr. potential test well pumped 18 BO, 210 BW w/GOR 856.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED [Signature] TITLE Asst. Dist. Mgr. DATE 2-24-81

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

ACCEPTED FOR RECORD

MAR 5 1981

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO