N. M. OIL CONS. COMMISSION
P. O. BOX 1980
HOBBS, NEW MEXICO 88240

Form Approved.
Budget Bureau No. 42-R1424

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 [X] gas well [ ] other

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. See space 17 below.) 2970' FNL & 2310' FEL
AT SURFACE: Unit Letter 'J'
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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.
2

10. FIELD OR WILDCAT NAME
Rhodes Yates

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 27, T-26-S, R-37-E

12. COUNTY OR PARISH
Lea

13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
2988' (GR)

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	[ ]		[ ]
FRACTURE TREAT	[X]		[ ]
SHOOT OR ACIDIZE	[ ]		[ ]
REPAIR WELL	[ ]		[ ]
PULL OR ALTER CASING	[ ]		[ ]
MULTIPLE COMPLETE	[ ]		[ ]
CHANGE ZONES	[ ]		[ ]
ABANDON*	[ ]		[ ]
(other)			

RECEIVED
MAR 18 1983
OIL & GAS
MINERALS MGMT. SERVICE
ROSWELL, NEW MEXICO

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

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. Rig up. Pull rods and pump. Install BOP.
2. Set Packer @ 3000'. Acidize Open Hole 3077'-3275' W/ 6000 gal mud acid in 2 stages using 1000# rock salt between stages. Flush.
3. Frac open hole section W/ 6000 gal gelled KCL water carrying 5000# 20/40 sand and 7000# 10/20 sand in 2 stages using 1000# rock salt between stages. Flush with produced water.
4. Install production equipment. Test and return to production.

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

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

SIGNED _____ TITLE Asst Dist Mgr DATE 3/17/83

(This space for Federal or State office use)

APPROVED
(Orig. Sgd.) PETER W. CHESTER
MAR 23 1983
FOR
JAMES A. GILLHAM
DISTRICT SUPERVISOR

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

*See Instructions on Reverse Side