STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease: State [X] Fee [ ]

5. State Oil & Gas Lease No.: B-1431

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 —" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL [ ] GAS WELL [ ] OTHER- **Water Injection**

7. Unit Agreement Name: **Rhodes Yates Unit**

2. Name of Operator: **TEXACO Inc.**

8. Farm or Lease Name: **Rhodes Yates Unit**

3. Address of Operator: **P. O. Box 728, Hobbs, New Mexico 88240**

9. Well No.: **7**

4. Location of Well: UNIT LETTER **F**, **1650** FEET FROM THE **North** LINE AND **2310** FEET FROM THE **West** LINE, SECTION **27** TOWNSHIP **26-S** RANGE **37-E** NMPM.

10. Field and Pool, or Wildcat: **Rhodes Yates**

15. Elevation (Show whether DF, RT, GR, etc.): **2990' (DF)**

12. County: **Lea**

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK [ ]	PLUG AND ABANDON [ ]	REMEDIAL WORK [ ]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]		COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [ ]	
OTHER [ ]		OTHER **Repair Water Flow** [ ]	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1. Rigged up. Install BOP. Pull tubing & pkr.
2. Set RBP @ 2972'. Test 5 ½" Csg. Locate leak between 742' - 762'.
3. Set cement retainer @ 731'. Cement 5 ½" Csg leak w/300 Sx. Class 'H' cement containing 7.8# Salt, .3% Halad-4 & 5# Gilsonite/Sx. Cement circulated. Squeeze w/add'l 150 Sx. Class 'H' Cement. WOC. DOC. Tested OK.
4. Install injection equipment. Test & return to injection.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED [signature] TITLE **Asst. Dist. Mgr.** DATE **6-11-81**

APPROVED BY _____ TITLE _____ DATE JUN 15 1981

CONDITIONS OF APPROVAL, IF ANY: