

UNITED STATES P. O. BOX 100
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Form approved,
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

5. LEASE DESIGNATION AND SERIAL NO.

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.

1

10. FIELD AND POOL, OR WILDCAT

Rhodes Yates

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

Section 27, T-26-S, R-37-E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

OIL ☒ GAS ☐ OTHER ☐

NAME OF OPERATOR

Texaco Inc

ADDRESS OF OPERATOR

P.O. Box 728, Hobbs, New Mexico 88240

LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)
At surface

1650' FNL & 1650' FEL (Unit Letter G)

4. PERMIT NO.

15. ELEVATIONS (Show whether DP, RT, OR, etc.)

2991' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACURE TREAT

SHOOT OR ACIDIZING

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANN

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Clean out and return to production

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

7. 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.)*

Work Performed

1/28/89 - 7/10/89

1. T1H with 6 1/8" bit on 2 3/8" workstring.

2. Drilled out CIBP @ 3022'

3. Cleaned out openhole from 3125'-3225' (PBTD 3260).

4. Ran 2 3/8" production tbg, pump and rods.

5. 24 hr. potential test ending 10:00 AM on 7/23/89. Pumped 16 BO and 610 BW.
change status from shut-in to pumping oil.

I hereby certify that the foregoing is true and correct

SIGNED

TITLE

AREA SUPERINTENDENT

DATE

JUL 31 1989

(This space for Federal or State office use)

(ORIG. SGD.) DAVID R. GLASS

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, 1989

*See Instructions on Reverse Side

RECEIVED