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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-181
Revised 1-1-65

5A. Indicate Type of Lease STATE ☒ FCC ☐
5. State Oil & Gas Lease No. B-7683-1
7. Unit Agreement Name Rhodes Storage
8. Farm or Lease Name Rhodes GSO
9. Well No. 18
10. Field and Pool, or Wildcat Rhodes Yates
12. County Lea
14. Proposed Depth 3250
15A. Formation Yates
16. Rotary or C.T. Rotary
21. Elevations (Show whether DR, RI, etc.) 2948.6
21A. Kind & Status Plug, Bond On file
21B. Drilling Contractor Capitan Drilling Company
22. Approx. Date Work will start 10-5-73

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK					
1a. Type of Work					
b. Type of Well DRILL ☒ DEEPEN ☐ PLUG BACK ☐					
c. Type of Well OIL WELL ☐ GAS WELL ☐ OTHER Gas Storage SINGLE ZONE ☐ MULTIPLE ZONE ☐					
2. Name of Operator El Paso Natural Gas Company					
3. Address of Operator 1800 Wilco Building, Midland, Texas 79701					
4. Location of Well UNIT LETTER D LOCATED 860 FEET FROM THE West LINE					
AND 660 FEET FROM THE North LINE OF SEC. 16 T.1N. 26S R.37E RMPLE					
21. Elevations (Show whether DR, RI, etc.) 2948.6					
21A. Kind & Status Plug, Bond On file					
21B. Drilling Contractor Capitan Drilling Company					
22. Approx. Date Work will start 10-5-73					

PROPOSED CASING AND CEMENT PROGRAM					
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/4"	8 5/8" MU 46	20.0#	565'	320 sxs	Surface
7 7/8"	4 1/2" K-55	10.5#	3250'	250 sxs	2750'

Plan is to drill 12 1/4" hole to approximately 565', run 8 5/8" 20# MU 46 csg and cement to surface. WOC 12 hrs. & test to 500#. Drill 7 7/8" hole to TD (3250'), run 4 1/2" K-55 csg & cement to approximately 2750'. WOC 24 hrs. & test to 1500#. Well will be completed for injection and withdrawal of gas in the Rhodes Yates formation.

Native mud and fresh water will be used to surface casing depth. Brine based mud will be used from surface casing to T.D.. 5000# Double gated BOP equipment will be used.

APPROVAL VALID
FOR 90 DAYS UNLESS
DRILLING COMMENCED,

EXPIRES 11-27-73

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM IF DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE FLOW-OUT PREVENTER PROGRAM, IF ANY.

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

Signed <u>C. D. Kypar</u>	Title <u>Production Clerk</u>	Date <u>August 22, 1973</u>
(This space for State Use)		
PROVED BY <u>[Signature]</u>	TITLE <u>SUPERVISOR DISTRICT 1</u>	DATE <u>AUG 29 1973</u>
REASONS OF APPROVAL, IF ANY:		