Form 3160-5 (June 1990)

UNI. STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

N.M. OIL CONS. CL., MISSIONRM APPROVED

P.O. BOX 1980 Budget Bureau No. 1004-0135 HOBBS, NEW MEXICO 88 220 HOBBS March 31, 1993

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SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.		5. State Oil / Gas Lease No.	
		NM25741 6. If Indian, Alottee or Tribe Name	
Use "APPLICATION F	FOR PERMIT —" for such proposals		
SUBM	IT IN TRIPLICATE	7. If Unit or CA, Agreement Designation	
1. Type of Well: OIL GAS OTHER Injection well		8. Well Name and Number	
		RHODES YATES UNIT	
2. Name of Operator TEXACO EXPLORA	ATION & PRODUCTION INC	13	
3. Address and Telephone No. P.O. BOX 730, HOBBS, NM 88240 397-0426		9. API Well No. 30 025 25693	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		10. Field and Pool, Exploaratory Area	
Unit Letter M : 660 Feet From The SOUTH Line and 660 Feet From The		RHODES YATES SEVEN RIVERS	
		11. County or Parish, State	
WEST Line Section 27	Township 26S Range 37E	LEA , NEW MEXICO	
12. Check Appropriate	Box(s) To Indicate Nature of Notice, R	Report, or Other Data	
TYPE OF SUBMISSION		TYPE OF ACTION	
	Abandonment	Change of Plans	
	Recompletion	New Construction	
Notice of Intent	Plugging Back	Non-Routine Fracturing	
Subsequent Report	Casing Repair Atlering Casing	Water Shut-Off Conversion to Injection	
Final Abandonment Notice	OTHER: Convert to Injecti		
	OTHER. CONTACT TO INJUST	(Note: Report results of multiple completion on Well	
	rty state all pertinent details, and give pertinent dates, includir	Completion or Recompletion Report and Log Form.)	
1) Pulled production equipment, installed BOP. 2) Acidize perfs (3176-3349) w/3K 15% NEFE. 3) Ran 2 3/8" cement lined injection tubing w/pac 4) Test casing to 500# 30 min (Chart copy on rev	ker set @ 2984'. rerse, chart to NMOCD)		
5) 7/29/93: Inj 405 BWPD @ 1200#.		FEB 2 11 CARLA AREA 11	
	AGGFPTED FOR BECC	SOE	
14. I hereby certify that the foregoing is-true and correct	TITLE Engr Asst	DATE 1/30/94	
SIGNATURE LARRY M		DATE 1730/94	
	V. Johnson		
(This space for Federal or State office use)	TITLE	DATE	
APPROVED BY	HILE	UNIE	
	n knowingly and willfully to make to any department or agency of the U	nited States any false, fictitious or fraudulent statements or	
representations as to any matter within its jurisdiction.			
		DeSoto/Nichols 12-93 ver 1.0	

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