

Form 3160-5
(July 1989)
(Formerly 9-331)

UNIT STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING
OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions on reverse side)

BLM Roswell District
Modified Form No.
NMO60-3160-4

5. LEASE DESIGNATION AND SERIAL NO.
LC-030174 B

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-" for such proposals.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR
TEXACO EXPLORATION AND PRODUCTION INC.

8. FARM OR LEASE NAME
W.H. RHODES FED 'B' NCT-1

3. ADDRESS OF OPERATOR
P. O. Box 3109, Midland, TX 79702

3a. AREA CODE & PHONE NO.
(915) 688-4620

9. WELL NO.
26

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

2310' FNL & 2310' FEL, UNIT LETTER G.

10. FIELD AND POOL, OR WILDCAT
RHODES YATES SEVEN RIVERS

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

SEC. 27, T-26-S, R-37-E

14. PERMIT NO.
API #30-025-32096

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
GR-2977'

12. COUNTY OR PARISH
LEA

13. STATE
NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) CHANGE WELL NAME ☒

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

(Other) ☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

(Other) ☒

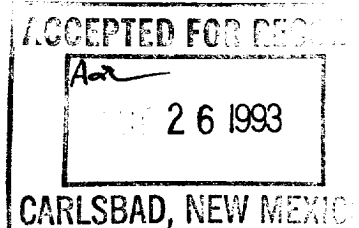
(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

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.)*

AS PART OF THE LEASE-LINE AGREEMENT BEING PROCESSED AT THIS TIME, THE NAME OF THIS WELL IS BEING CHANGED:

THE NEW NAME IS: RHODES NCT COOP FED. COM-1 WELL No. 2

ATTACHED IS A NEW PLAT (FORM C-102) SHOWING THE REVISED NAME AND REVISED DEDICATED ACREAGE.



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

SIGNED C.P. Basham / cwh

TITLE DRILLING OPERATIONS MANAGER

DATE 10-04-93

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side