

UNITED 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

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.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR TEXACO EXPLORATION AND PRODUCTION INC.		8. FARM OR LEASE NAME W. H. RHODES '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. 24
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1375' FNL & 95' FEL, UNIT LETTER H, SE/NE		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 #30-025-32098	15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR-2987', KB-2998'	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) ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

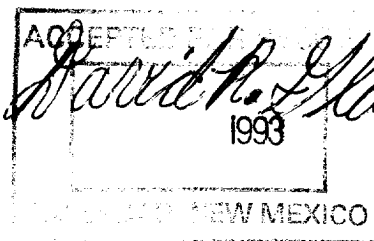
WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) ☒ COMPLETION

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

(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.)*

1. HLS TH & TAGGED PBD @ 3251'. TESTED CASING TO 3000# FOR 30 MINUTES 10-5-93. RAN GR-CCL. PERFED WITH 4 JSPF: 3070' TO 3096'. 104 HOLES.
2. DOWELL PUMPED 2500 GAL 2% KCL WATER. FRAC WITH 33000 GAL XLG w/ 164000# 12/20 SAND.
3. PUMPED 25 BLW IN 5 HOURS 10-12-93.
4. DOWELL SQUEEZED PERFS 3070'-3096' WITH 100 SACKS CLASS H w/ .8% D127, 2% CACL2 @ 15.6PPG, F/B 100 SACKS CLASS H w/ 2% CACL2 @ 15.6PPG. 10-20-93.
5. CLEAN OUT CEMENT TO 3300'. INJECTED INTO PERFS 2 BPM @ 1600#. RESQUEEZED PERFS WITH 75 SACKS CLASS H w/ .8% D127, 2% CACL2 @ 15.6PPG. 10-26-93. TH & CLEAN OUT CEMENT TO 3300'. TESTED CASING TO 1000# FOR 30 MINUTES 10-27-93.
6. PERFED 3196' TO 3212' WITH 4 JSPF: 64 HOLES.
7. DOWELL PUMPED 1000 GAL 2% KCL. FRACED WITH 24000 GAL XLG w/ 54000# 12/20 SAND. 10-29-93.
8. TH WITH 2 7/8 TUBING, PUMP AND RODS.
9. PUMPED 24 HOURS ON POTENTIAL TEST 11-3-93. RECOVERED 22 BO, 443 BW AND 6 MCFTD.



NOV 8 8 52 AM '93
RECEIVED

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

SIGNED C.P. Basham / cwh

TITLE DRILLING OPERATIONS MANAGER

DATE 11-04-93

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side