(Initiation) ONLY STATES OF C	TACT RECEIVING BLM Roswell District CE FOR NUMBER Modified Form No. OPIES REQUIRED NM060-3160-4
(Formerly 9-331) DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT	r instructions on reverse 5. LEASE DESIGNATION AND SERIAL NO. LC-030174 B
SUNDRY NOTICES AND REPORTS ON WEL (Do not use this form for proposals to drill or to deepen or plug back to a difference of use "APPLICATION FOR PERMIT-" for such proposals.)	
1. OIL X GAS WELL OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR TEXACO EXPLORATION AND PRODUCTION INC.	8. FARM OR LEASE NAME (1) W. H. RHODES 'B' NCT-1
3. ADDRESS OF OPERATOR	EA CODE & PHONE NO. 9. WELL NO.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirem See also space 17 below.)) 688-4620 24 ents.* 10. FIELD AND POOL, OR WILDCAT RHODES YATES SEVEN RIVERS
At surface 1375' FNL & 95' FEL, UNIT LETTER H, SE/NE	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, GR-2987', KB-2998')	etc.) 12. COUNTY OR PARISH 13. STATE LEA NM
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREAT SHOOT OR ACIDIZE ABANDON* SHO	TER SHUT-OFF REPAIRING WELL ALTERING CASING ABANDONMENT* (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
 DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and posed work. If well is directionally drilled, give subsurface locations and measure work.)⁴ 	
1. DRILLED 7 7/8 HOLE TO 3325'. TD @ 7:30 AM 09-29-93. 2. HLS RAN GR-DLL-MSFL-SONIC-CAL AND GR-CNL-LDT-CAL FROM 3. RAN 78 JTS OF 5 1/2, 15.5#, WC-50, LTC CASING SET @ 3324. DOWELL CEMENTED WITH 650 SACKS 35/65 POZ CLASS H w/F/B 250 SACKS CLASS H w/ 2% CACL2 @ 15.6ppg. PLUG DOWN 6	95'. RAN 12 CENTRALIZERS. 6% GEL, 5% SALT, 1/4# FLOCELE @ 12.8ppg,
5. ND. RELEASE RIG @ 9:00 AM 09-30-93. 6. PREP TO COMPLETE.	<u> </u>
	EPTED FOR RECC. OCT 2 2 1993
18. I heraby certify that the foregoing is true and correct	OCT 2 2 1993 RLSBAD, NEW MEXICO
18. I heraby certify that the foregoing is true and correct	EPTED FOR RECC. OCT 2 2 1993