

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT REPLYING
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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. LC-030174 B	
2. NAME OF OPERATOR TEXACO EXPLORATION AND PRODUCTION INC.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 3109, Midland, TX 79702	3a. AREA CODE & PHONE NO. (915) 688-4620	7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1156' FNL & 1155' FEL, UNIT LETTER A, NE/NE		8. FARM OR LEASE NAME W. H. RHODES 'B' NCT-1	
14. PERMIT NO. API #30-025-32099		9. WELL NO. 25	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR-2981', KB-2991'		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	
		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) **PRODUCTION CASING** ☒

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. DRILLED 7 7/8 HOLE TO 3350'. TD @ 6:15 AM 10-10-93.

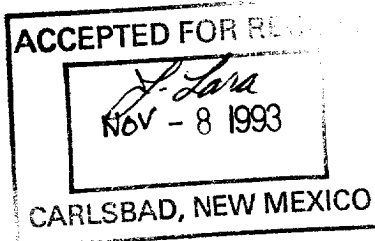
2. HLS RAN GR-DLL-MSFL-SHC-SONIC-CAL AND GR-CNL-LDT-CAL FROM 3350' TO 2700'. PULLED GR-CNL TO SURFACE.

3. RAN 78 JTS OF 5 1/2, 15.5#, WC-50, LTC CASING SET @ 3350'. RAN 12 CENTRALIZERS.

4. DOWELL CEMENTED WITH 550 SACKS 35/65 POZ CLASS H w/ 6% GEL, 5% SALT, 1/4# FLOCELE @ 12.8 PPG, F/B 250 SACKS CLASS H w/ 2% CACL2 @ 15.6 PPG. PLUG DOWN @ 5:30 AM 10-11-93. CIRCULATED 37 SACKS.

5. ND. RELEASE RIG @ 9:00 AM 10-11-93.

6. PREP TO COMPLETE.



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

SIGNED C.R. Basham / cmh

TITLE DRILLING OPERATIONS MANAGER

DATE 10-12-93

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

***See Instructions on Reverse Side**