

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240
DISTRICT II
P.O. Box Drawer DD, Artesia, NM 88210
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30 025 32173
5. Indicate Type of Lease STATE [ ] FEE [X]
6. State Oil / Gas Lease No.
7. Lease Name or Unit Agreement Name HARRISON, BF B
8. Well No. 14
9. Pool Name or Wildcat North Teague Glorieta-Upper Paddock, SW
10. Elevation (Show whether DF, RKB, RT,GR, etc.) GR-3314', KB-3328'

SUNDRY NOTICES AND REPORTS ON WELL
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS.)
1. Type of Well: OIL WELL [X] GAS WELL [ ] OTHER [ ]
2. Name of Operator TEXACO EXPLORATION & PRODUCTION INC.
3. Address of Operator P.O. BOX 730, HOBBS, NM 88240
4. Well Location Unit Letter F : 1800 Feet From The N Line and 1650 Feet From The W Line
Section 9 Township 23S Range 37E NMPM LEA COUNTY
10. Elevation (Show whether DF, RKB, RT,GR, etc.) GR-3314', KB-3328'

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO:
PERFORM REMEDIAL WORK [ ] PLUG AND ABANDON [ ]
TEMPORARILY ABANDON [ ] CHANGE PLANS [ ]
PULL OR ALTER CASING [ ]
OTHER: additional perforations [X]
SUBSEQUENT REPORT OF:
REMEDIAL WORK [ ] ALTERING CASING [ ]
COMMENCE DRILLING OPERATION [ ] PLUG AND ABANDONMENT [ ]
CASING TEST AND CEMENT JOB [ ]
OTHER: [ ]

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Texaco Exploration and Production Inc. intends to add a perforated interval in the Paddock zone and then acidize and scale squeeze.
1. MIRU. Install BOP.
2. TIH with casing scapers and clean out to 5200'.
3. Perforate Paddock with 2 jspf from 5136'-5150' (28 holes).
4. TIH with packer and set @ 5050'. pump 300 gallons 7.5% HCL. Reverse acid to pit.
5. Acid stimulate with 3000 gallons 15% NEFE + 1008 gelled brine; Pmax=750psig.
6. TOH with stimulation equipment.
7. Return to production and test.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE [Signature] TITLE Engineering Assistant DATE 5/18/95
TYPE OR PRINT NAME Darrell J. Carriger Telephone No. 397-0426
APPROVED BY [Signature] DISTRICT I SUPERVISOR TITLE DATE MAY 23 1995
CONDITIONS OF APPROVAL, IF ANY: