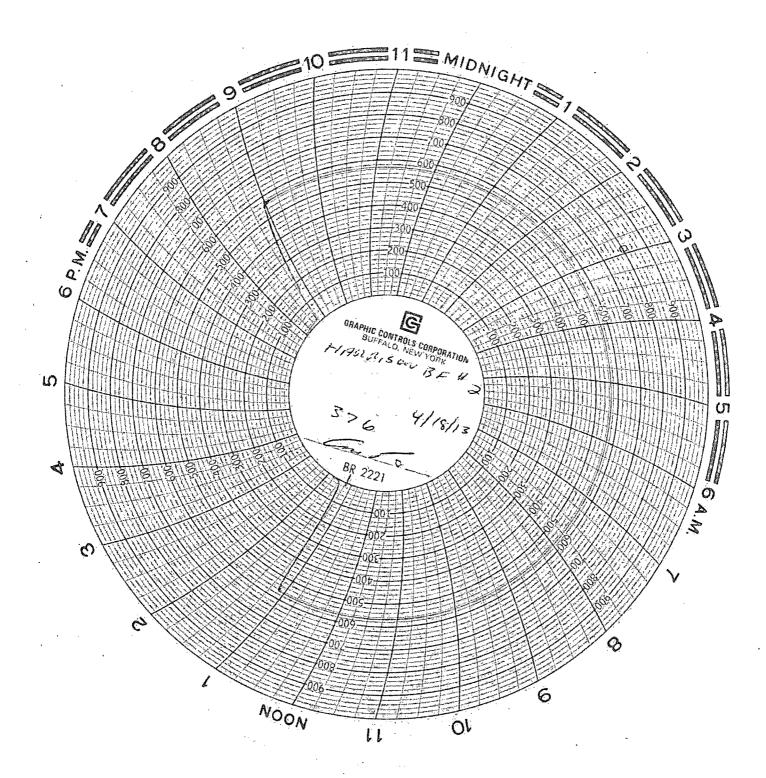
Submit 1 Copy To Appropriate District	State of New Me	xico	Form C-103	
Office <b>→</b> •District I = (575) 393-6161	Energy, Minerals and Natur	ral Resources		Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
District II - (575) 748-1283 811 S. First St., Artesia, NM 88210			30-025-30568	
			5. Indicate Type of Lease STATE ☑ FEE □	
District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 8741 MAY 0 3 2013 Santa Fe, NM 87505		6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM			o. Blate on	a Gus Bease 116.
SUNDRY NOTICES AND REPORTS ON WELLS			7 Lease Na	ame or Unit Agreement Name
(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.)			B.F. HARRISON "B"	
1. Type of Well: Oil Well Gas Well Other			8. Well Number 2	
2. Name of Operator			9. OGRID Number 4323	
CHEVRON U.S.A. INC.				
<ol> <li>Address of Operator</li> <li>SMITH ROAD, MIDLAND, TEXAS 79705</li> </ol>			10. Pool name or Wildcat Teague; WOLFCAMP, NORTH	
4. Well Location				
Unit Letter F: 1980 feet	from the NORTH line and 1800 fe	eet from the WEST	line	
Section 9 Township 23-S Range 37-E NMPM County LEA				
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
NOTICE OF IN PERFORM REMEDIAL WORK TEMPORARILY ABANDON DULL OR ALTER CASING DOWNHOLE COMMINGLE	Appropriate Box to Indicate National ITENTION TO:  PLUG AND ABANDON  CHANGE PLANS  MULTIPLE COMPL   Illetted operations. (Clearly state all p	SUBS REMEDIAL WORK COMMENCE DRING CASING/CEMENT OTHER: EXTE	SEQUENT  C LLING OPNS. JOB  END TA STAT	REPORT OF:  ALTERING CASING  P AND A  US W/CHART
of starting any proposed we proposed completion or rec	ork). SEE RULE 19.15.7.14 NMAC completion.	C. For Multiple Con	npletions: At	tach wellbore diagram of
04/18/2013: NOTIFIED NMOCD. RAN CHART. PRESS TO 580 PSI FOR 30 MINUTES. (COPY OF CHART ATTACHED).				
TA STATUS IS EXTENDED				
Spud Date:	Rig Release Da	ite:		
hereby certify that the information	above is true and complete to the be	est of my knowledge	and belief.	
( \lambda_1  \tag{\lambda}_1  \tag{\lambda}_1 \	In Her ton			
SIGNATURE / YUSE		JLATORY SPECIA	ALIST DAT	TE: 04-30-2013
Type or print name DENISE PINKE For State Use Only	ERTON E-mail address: leakejd@	@chevron.com	PHC	DNE: 432-687-7375
ADDROVED BY		id w		
APPROVED BY:  Conditions of Approval (if any):	TITLE	1st, rear	age ( -2014	DATE
	This Approval of Tem	porary - 18	-2014	<u>-</u>



Cheuron USA

BF HARRISON' B' #2

BF HARRISON' B' #2

30.025.30568

4/18/13

1980' FNL, 1800' FWL

UIL F 9 7.23.5, R.37.E

SEC 9 T.23.S, R.37.E

LEA COUNTY NM

LEA COUNTY SES PSI FOR

LEA COUNTY SES PSI

60 MIN 30 MIN