

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.	30-025-32172
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil / Gas Lease No.	
7. Lease Name or Unit Agreement Name	B.F. HARRISON 'B'
8. Well No.	12
9. Pool Name or Wildcat	TEAGUE; FUSSELMAN, NORTH
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	GR-3312', KB-3326'

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMI (FORM C-101) FOR SUCH PROPOSALS.

1. Type of Well: OIL WELL  GAS WELL  OTHER

2. Name of Operator CHEVRON USA INC

3. Address of Operator 15 SMITH RD, MIDLAND, TX 79705

4. Well Location Unit Letter C : 760 Feet From The NORTH Line and 2100 Feet From The WEST Line Section 9 Township 23-SO Range 37-EA NMPM LEA COUNTY

10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR-3312', KB-3326'

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPERATION <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	TA WITH CHART <input checked="" type="checkbox"/>

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.

4-24-2007: CIBP SET @ 8715'. TEST CSG TO 590 PSI FOR 30 MINUTES. WELL IS TEMPORARILY ABANDONED.

This Approval of Temporary Abandonment Expires 4/24/12

I hereby certify that the information above is true and complete to the best of my knowledge and belief

SIGNATURE Denise Pinkerton TITLE Regulatory Specialist DATE 5/7/2007

TYPE OR PRINT NAME Denise Pinkerton Telephone No. 432-687-7375

APPROVED [Signature] TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE MAY 16 2007

CONDITIONS OF APPROVAL, IF ANY:

HARRISON B 12

A.F. Harrison  
last  
calculated  
4/4/69

NAPOES  
D. H. 12/12/69

739 4/4/69