Submit 3 copies to Appropriate District Office  DISTRICT i P.O. Box 1980, Hobbs, NM 88240  P.O. Box 2088  Form C-103 Revised 1-1-89  WELL API NO. 9.0. Box 2088  30 025 32159		
P.O. Box 1980 Hobbs, NM, 88240		
P.O. Box 1980 Hobbs, NM, 88240		
P. F. RAY 2088 1 30 0/2 3/159		
DISTRICT II Santa Fo. Now Movico 87504-2088 5 Indicate Type of Lease		
STATE STATE FEE X		
DISTRICT III  6. State Oil / Gas Lease No.		
SUNDRY NOTICES AND REPORTS ON WELL		
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS.)  HARRISON, B. F B -		
1. Type of Well: OIL GAS WELL OTHER		
2. Name of Operator TEXACO EXPLORATION & PRODUCTION INC.  8. Well No. 18		
3. Address of Operator P.O. BOX 730, HORRS, NM, 88240.  9. Pool Name or Wildcat		
NORTH TEAGUE SAN ANDRES  4. Well Location		
Unit Letter <u>D</u> ; 990 Feet From The <u>NORTH</u> Line and <u>660</u> Feet From The <u>WEST</u> Line		
Section 9 Township 23-SO Range 37-EA NMPM LEA COUNTY		
10. Elevation (Show whether DF, RKB, RT,GR, etc.) GR-3319', KB-3331'		
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
THE DIVING AND ADMINOR TO DESCRIPTION OF THE PROPERTY OF THE P		
CUANCE PLANS		
TEMPORARILY ADAPTION		
PULL OR ALTER CASING CASING CASING TEST AND CEMENT JOB CASING TEST AND CEME		
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.		
Objective: Texaco intends to abandon the current perforated interval (San Andres) and recomplete up-hole to the Upper San Andres interval.		
<ol> <li>MIRU. Install BOP. TOH with current production equipment.</li> <li>TIH with CIBP and set @ 3846' (50' above uppermost perforation). Cap plug with 35' cement.</li> </ol>		
3. Pick perforations in the Upper San Andres interval.		
4. Perforate Upper San Andres interval.		
5. Fracture stimulate new perforations. 6. Flow well back and return to production  (i) (ii) (iii) (i		
7. Place well on test.		
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I hereby certify that the information above is to SIGNATURE	TITLE Engineering Assistant	DATE 6/27/95
TYPE OR PRINT NAME	Darrell . Carriger	Telephone No. 397-0426
(This space for State Use)	Orig. Signed by Paul Kantz	##W a A 4005
APPROVED BY	Gologist TITLE	DATE JUN 3 0 1995

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