State of New Mexico

Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

OIL C

CONSERVATION DIVISION	
P.O. Box 2088	

WELL API NO. 30-025-34995

DICTRICT II		1.0.0	OK 2000				
DISTRICT II P.O. Box Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088			Indicate Type of Lease STATE FEE				
DISTRICT III	,						FEE 🗸
1000 Rio Brazos Rd., Azte	c, NM 87410				6. State Oil / Gas Lease I	No. 	
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.			7. Lease Name or Unit Agreement Name B F HARRISON "B"				
Type of Well: OIL WELL	GAS WELL	OTHER NEW D	RILL				
2. Name of Operator	TEXACO EXF	PLORATION & PRODUCTIO	N INC.		8. Well No. 27		
3. Address of Operator 205 E. Bender, HOBBS, NM 88240			Pool Name or Wildcat NORTH TEAGUE LWR PADDOCK BLINEBRY				
4. Well Location					•		
Unit Letter_	0:	330 Feet From The	SOUTH Line an	d <u>1650</u>	Feet From The EAS	T Line	
Section 5		Township 23-S	Range 37-E	NN	IPM	LEA COUN	ΓY
		10. Elevation (Show whether	OF, RKB, RT,GR, etc.)	3331'			
11.	Check Ap	opropriate Box to Indica	ite Nature of Not	ice, Report,	or Other Data		
	———		1	0.1	IDOEOUENT DE	DODT OF	

NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK		PLUG AND ABANDON		REMEDIAL WORK		✓	ALTERING CASING	
TEMPORARILY ABANDON	_	CHANGE PLANS		COMMENCE DRILLING OPER	RATION	_	PLUG AND ABANDONMENT	
PULL OR ALTER CASING	_			CASING TEST AND CEMENT	JOB	_		
OTHER:				OTHER:	PRO	TOUG	TION CASING	

8-12-00: RAN 175 JTS 5 1/2" CSG: 3 JTS 5 1/2", 17#, L-80, LT&C 1486; 142 JTS 5 1/2", 17#, J-55 LT&C 6264', 7750' KB, SET @ 7738'. DV @ 5947'. FC @ 7704'. CMT 1ST STAGE W/1275 SX CL H 35/65 POZ W/6% GEL, 5% SALT, 1/4# CELL, MIXED @ 12.4 PPG, TAIL 2ND STAGE 300 SX 50/50 POZ W/2% GEL, 5% SALT, 1/4 CELL, MIXED @ 14.2 PPG. PLUG DOWN @ 05:10 AM 8-12-00. CIRC 200 SX CMT. NDBOP. SET 11"X5 1/2" C-22 CSG HANGER. CUT OFF 5 1/2" CSG. NU 11"X3MX7 1/16"X3M, TEST TO 3000. OK. REL RIG @ 1100 HRS 8-12-00

TYPE OR PRINT NAME I hereby certify that the information above is rue and complete to the best of my knowledge and belief. TYPE OR PRINT NAME J. Denise Leake	Engineering Assistant	DATE Telephone No.	8/13/00 397-0405
(This space for State Use) JRIGIPIAL SIGNED BY CHRIS WITH APPROVED DISTRICT I SUPPLIED BY MINISTER BONDITIONS OF APPROVAL IF ANY: TITLE	DATE	DeSolothich	JIS 12-93 yer 1 0

^{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.