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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS
(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. ☐ OIL WELL ☒ GAS WELL ☐ OTHER-

2. Name of Operator
UNION TEXAS PETROLEUM CORPORATION

3. Address of Operator
14001 E Iliff Avenue, Suite 500, Aurora, Colorado 80014

4. Location of Well
UNIT LETTER D 790 FEET FROM THE North LINE AND 790 FEET FROM
THE West LINE, SECTION 16 TOWNSHIP 29N RANGE 12W NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
5773 GL

7. Unit Agreement Name

8. Farm or Lease Name
New Mexico "A" Com

9. Well No.
1E

10. Field and Pool, or Wildcat
Basin Dakota

12. County
San Juan

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <u>Extension of APD</u> <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
		OTHER _____	<input type="checkbox"/>

17. 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.

We request the APD approval for this well be extended for six months. The well is planned to be spudded in the 3rd Quarter of 1983.

Oct. 8, 1983

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

SIGNED *Frank T. Chavez* TITLE Division Operations Manager DATE April 7, 1983

APPROVED BY Original Signed by FRANK T. CHAVEZ TITLE SUPERVISOR DISTRICT # 3 DATE APR 8 - 1983

CONDITIONS OF APPROVAL, IF ANY: