District	Submit 3 Copies To Appropriate District Office	State of New M	Aexico	Form C-103	
District IV Santa Fe, NM 87410 Santa Fe, NM 87505 Santa Fe, NM 8		Energy, Minerals and Na	itural Resources	May 27, 2004	
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Santa Fe, NM 87505	District III	1220 South St. Francis Dr.			
1202 St. Francis Dc. Status Fc. NM 2700 St. Francis Dc. Status Fc. NM 2700 St. Francis Dc. Status Fc. NM 2700 St. Francis Dc. St. Fra		c, NM 87410 Santa Fe, NM 87505			
SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name 100 NOT USE THIS FORM FOR REPORDASIA TO BUILD OR TO PETER PORT SERROUR. USE "APPLICATION FOR PERMIT" (FORM C-191) FOR SUCH 78 1. Type of Well: USE "APPLICATION FOR PERMIT" (FORM C-191) FOR SUCH 78 1. Type of Well: USE "APPLICATION FOR PERMIT" (FORM C-191) FOR SUCH 78 1. Well Number 78 1. Well Number 78 1. Well Number 78 1. Well Number 183718 1. Type of Well: United Heritage New Mexico Corp. 10. Pool name or Wildcat CATO SAN ANDRES 10540 1. Address of Operator 10. Pool name or Wildcat CATO SAN ANDRES 10540 1. Elevation 11. Elevation (Show whether DR RRB. RT. CR. etc.) 4. (105**GL. 4.115** KB. 11. Elevation (Show whether DR RRB. RT. CR. etc.) 4. (105**GL. 4.115** KB. 11. Elevation (Show whether DR RRB. RT. CR. etc.) 4. (105**GL. 4.115** KB. 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: REMEDIAL WORK PLUG AND ABANDON CHANGE PLANS CHANGE PLANS CONSTRUCTION ABARDON CHANGE PLANS CHANGE PLANS CONSTRUCTION PROPERTY OF COMMENCE PRUBLICATION PARTY OF THE PORT OF COMMENCE PRUBLICATION PARTY OF THE PORT OF COMMENCE PRUBLICATION PARTY OF PAND A CASING/CEMENT JOB PAND A CASING/CEMEN	1220 S. St. Francis Dr., Santa Fe, NM				
DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEFFEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PREMIT" (FORM C-191) FOR SUCH PROPOSALS) Type of Well: Oil Well		ICES AND REPORTS ON WEL	IS	7 Lease Name or Unit Agreement Name	
ROPOSALS 1. Type of Well: Oil Well Gas Well Other	(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Boase Name of Sint rigidement Name	
1. Type of Well: Oil Well		CATION FOR PERMIT" (FORM C-101)	FOR SUCH	CATO SAN ANDRES UNIT	
2. Name of Operator 9. OGRID Number 183718		Gas Well Other		8. Well Number 78	
United Heritage New Mexico Corp. 3. Address of Operator 200 LORAINE, Suite 400, MIDLAND, TX 79701 4. Well Location Unit Letter: D 660° feet from the NORTH line and 660° feet from the WEST line Section 14 Township 8-S Range 30-E NMPM CHAVES County 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4. 10.5°-GL, 4.115′- KB. Pit or Below-grade Tank Application To-Cloure Distance from acarest fresh water well Distance from acarest surface water Pit Liner Thickness: mil Below-Grade Tank: Volume Distance from acarest fresh water well Distance from acarest surface water Pit Liner Thickness: mil Below-Grade Tank: Volume Distance from acarest surface water Pit Liner Thickness: mil Below-Grade Tank: Volume Distance from acarest surface water Pit Liner Thickness: mil Below-Grade Tank: Volume Distance from acarest surface water Pit Liner Thickness: mil Below-Grade Tank: Volume Distance from acarest surface water Distance from acarest surface water Pit Liner Thickness: mil Below-Grade Tank: Volume Distance from acarest surface water Pit Liner Thickness: mil Below-Grade Tank: Volume Distance from acarest surface water Distance from acarest surface water Pit Liner Thickness: mil Below-Grade Tank: Volume Distance from acarest surface water Distance from acarest surface water Pit Liner Thickness: mil Below-Grade Tank: Volume Distance from acarest surface water Dis		Gas Well Guiel		9 OGRID Number 183718	
3. Address of Operator 10. Pool name or Wildcat).		7. GGRID Hamosi	
Well Location Unit Letter: D				10. Pool name or Wildcat	
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Section 14 Township & S Range 30-E NMPM CHAVES County	Unit Letter: D 66	0' feet from the NORTH lis	ne and 660' feet f	from the WEST line	
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12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
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APPROVED BY: Vary William TITLE DATE TO 100 17 200		/SOII E-mail address: J	Kiawson@iothian.us	reiepnone No. 432-080-2018	
APPROVED BY: Vary William TITLE DATE TO 100 17 200	FOR State Use Unity	1	CERRESENT	ATIVE II/STAFF MANAGER	
Conditions of Approval (if any):	APPROVED BY: Mary la			DATE NUV 1 7 200	
V					