

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-015-23220
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 115970
7. Lease Name or Unit Agreement Name Carlsbad - Pecos
8. Well No. 1
9. Pool name or Wildcat Dublin Ranch (Morrow)

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. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	2. Name of Operator Unit Petroleum Company
3. Address of Operator P. O. Box 186, Booker Texas 79005	4. Well Location Unit Letter G : 1980' Feet From The North Line and 1980' Feet From The East Line Section 29 Township 22 South Range 28 East NMJM Eddy County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GL 3042'	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: Test for hole in casing <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input 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.

- 1.) Rig down X-mas tree and rig up BOP.
- 2.) Trip out of the hole with 2-7/8" tubing and guiberson packer.
- 3.) Run magnetic CSG Inspection Tools.
- 4.) If casing problems are indicated, isolate and repair as necessary.
- 5.) Run completion assembly and resume production.

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

SIGNATURE James F. O'Briant TITLE Agent for Unit Petr. Co. DATE 2/16/95
TYPE OR PRINT NAME James F. O'Briant TELEPHONE NO. (915) 683-5511

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

APPROVED BY

TITLE

DATE

FEB 27 1995

CONDITIONS OF APPROVAL, IF ANY: