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NEW MEXICO OIL CONSERVATION COMMISSION: C.

MAR 23 1 27 PM '67

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

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
2. Name of Operator Union Texas Petroleum Corp.	5. State Oil & Gas Lease No.
3. Address of Operator 1300 Wilco Bldg., Midland, Texas	7. Unit Agreement Name
4. Location of Well UNIT LETTER M 660 FEET FROM THE south LINE AND 660 FEET FROM THE west LINE, SECTION 9 TOWNSHIP 8-S RANGE 30-E NMPM.	8. Farm or Lease Name Crosby
15. Elevation (Show whether DF, RT, GR, etc.) 4065' DF	9. Well No. 7
	10. Field and Pool, or Wildcat UNDESIGNATED
	12. County Chaves

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 <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" 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.

Spud 5:15 p.m. 2-23-67
2-24-67 TD 540' Set 8-5/8" OD 20# new casing at 537' and cmtd w/300 sx. Cmt circ. WOC 24 hrs. Tested 8-5/8" OD casing to 1000# for 30 mins. Tested OK.

Reached TD 3450' 3-1-67
3-1-67 TD 3450' Set 4-1/2" OD 9.5# new casing at 3444' and cmtd w/300 sx. Top of Cmt outside of 4-1/2" OD casing at 2270' by TS. WOC 24 hrs. Tested 4-1/2" casing to 1000#. Tested OK.

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

SIGNED *[Signature]* TITLE Office Supervisor DATE 3-21-67

APPROVED BY *[Signature]* TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: