

Submit 1 Copy To Appropriate District Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-015-38993
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Unit Petroleum Company		6. State Oil & Gas Lease No. NM-53373
3. Address of Operator P.O. Box 702500 Tulsa, Ok 74170-2500		7. Lease Name or Unit Agreement Name H.B. 3 Federal
4. Well Location Unit Letter _____ : 330 feet from the _____ S line and _____ 330 feet from the _____ E line Section 3 Township 24S Range 29E NMPM Eddy County		8. Well Number #4H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3052 GR		9. OGRID Number 115970
		10. Pool name or Wildcat Cedar Canyon-Bone Spring

12. 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"/>	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"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Anticipate Start Date 8/17/15

Test csg and determine interval responsible for water production.

1. Pull test anchors and MIRU well service unit.
2. Clean up around wellhead
3. NU BOP w/ 2 7/8" pipe rams and POOH w/tbg.
4. Possible collar leak.
5. TIH w/ 5 1/2" 10k RBP and spot sand & pkr.
6. SET RBP at 8,018' and test at 500 psi.
7. Move packer up the hole +/- 15 ft. at a time and test casing. Isolate casing leak.
8. If leak is detected, set test pkr, need to get injection rate. Release test pkr. POOH.
9. TIH with cement retainer, load and test csg.
10. MIRU cement truck, pump sufficient amount to repair leak. WOC.
11. PU BHA, TIH tag cmt PU power swivel. Drill out squeeze.
12. LD BHA & PS. Release all rental equipment. Rod up and move pumping unit to location.
13. Clean location & return well to production.

NM OIL CONSERVATION  
ARTESIA DISTRICT

AUG 17 2015

RECEIVED

Spud Date: 8/7/2011

Rig Release Date: 9/11/2011

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

SIGNATURE Helene Arnold TITLE Regulatory Tech DATE 8/13/2015

Type or print name Helene Arnold E-mail address: Helene.arnold@unitcorp.com PHONE: 918-477-4469

For State Use Only

APPROVED BY: Dr. J. Spewison TITLE Dr. J. Spewison DATE 9/1/15

Conditions of Approval (if any):