

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

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

WELL API NO. 30-005-20677
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. K 3259-8
7. Lease Name or Unit Agreement Name Cato SA (aka; NM'H' State #17)
8. Well Number 94
9. OGRID Number 183718
10. Pool name or Wildcat Cato San Andres

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 type="checkbox"/> Other <input type="checkbox"/> Injection <input type="checkbox"/>	7. Lease Name or Unit Agreement Name Cato SA (aka; NM'H' State #17)
2. Name of Operator UHC New Mexico Corp.	8. Well Number 94
3. Address of Operator P.O. Box 450, 303 W. Main, Ste. 300, Artesia, N.M. 88210	9. OGRID Number 183718
4. Well Location Unit Letter <u>G</u> : <u>1328</u> feet from the <u>N</u> line and <u>1336</u> feet from the <u>E</u> line Section <u>16</u> Township <u>8S</u> Range <u>30E</u> NMPM Chavez County	10. Pool name or Wildcat Cato San Andres
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

12. 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 checked="" 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"/>	
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

07-06-06 MIRU. Releas pkr, POOH. RIH open ended, tag, fill @ 3398', POOH. Stood back tbq. Shut dn.

07-07-06 Move off work string, RIH w/ 4 3/4 drill bit, 6 drill collars & tbq to 3200'. Shut dn.

07-10-06 RIH w/ tbq from 3200' to 3395'. Tag, p/u power swivel, started drilling dn to 3418'. Circulated clean, POOH & lay dn work string & drill collars. Shut dn.

07-11-06 R/U wireline trk, reperforated. R/D wireline trk, RIH w/ pkr. Hydrotest tbq, set pkr @ 3200'. Acidize & shut dn.

07-12-06 Bleed well dn, released pkr. Nipple dn BOP, circulated pkr fluid. Set pkr, test csg to 400psi, held ok. R/D.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Regina Wolf TITLE Production Clerk DATE 8-7-06

Type or print name Regina Wolf E-mail address: regina@lothian.us Telephone No. 505-746-4448

For State Use Only

APPROVED BY: Harry W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE AUG 10 2006
Conditions of Approval (if any):