

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

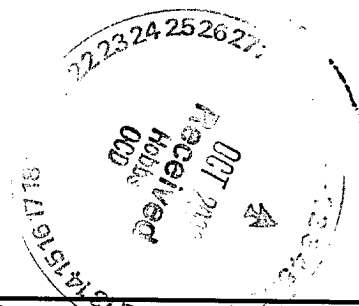
WELL API NO. 30-005-20105
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Cato San Andres
8. Well Number 142
9. OGRID Number 183718
10. Pool name or Wildcat Cato San Andres

<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.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator UHC New Mexico Corp.	
3. Address of Operator P.O. Box 450, 303 W. Main, Ste. 300, Artesia, N.M. 88210	
4. Well Location Unit Letter <u>K</u> : 1980 <u>      </u> feet from the <u>South</u> line and 1980 <u>      </u> feet from the <u>West</u> line Section <u>23</u> Township <u>8S</u> Range <u>30E</u> NMPM <u>Chavez</u> County <u>      </u>	
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 <u>      </u> Depth to Groundwater <u>      </u> Distance from nearest fresh water well <u>      </u> Distance from nearest surface water <u>      </u>	
Pit Liner Thickness: <u>      </u> mil Below-Grade Tank: Volume <u>      </u> bbls; Construction Material <u>      </u>	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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.
- 09-27-06 MIRU start in hole w/ bailer and tbq, tag @ 3676'. POOH w/ bailer and tbq, RIH w/ pkr and 80 jts. Test csg, held 400psi. POOH w/ tbq and pkr. Secure well shut dwn.
- 09-28-06 RIH w/ 108 jts 2 3/8 tbq and SN set @ 3611.58'. RIH w/ pump 20 7/8, 122 3/4, 1 -8' sub, 1- 6' sub, 1 - 4' sub seat pump space out well, load tbq, test pump action. Secure well rig dwn.



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 [Signature] TITLE Production Tech DATE 10-2-06

Type or print name Ronnie Grado E-mail address: rgrado@lothian.us Telephone No. 505-746-4448

For State Use Only

APPROVED BY: [Signature] TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE OCT 04 2006  
Conditions of Approval (if any):