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NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION	HOBBS OFFICE O. C. C.	Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE	DEC 29 11 50 PN '66	
U.S.G.S.	DEC 73 11 20 10 00	5a. Indicate Type of Lease
LAND OFFICE		State Fee X
OPERATOR		5. State Oil & Gas Lease No.
<u>.</u>		
(DO NOT USE THIS FORM FOR	DRY NOTICES AND REPORTS ON WELLS proposals to orill or to deepen or plug back to a different reservoir. cation for permit -" (form C-101) for such proposals.)	
1. OIL GAS GAS WELL	OTHER.	7. Unit Agreement Name
2. Name of Operator		8. Farm or Lease Name
Union Texas Petro	leum Corporation	Cato
3. Address of Operator		9. Well No.
1300 Wilco Bldg.,	Midland, Texas	4
4. Location of Well		10. Field and Pool, or Wildcat
B	660 FEET FROM THE NOT th LINE AND 1980 FEET FROM	Cato (San Andres)
UNIT LETTER,	FEET FROM THE LINE AND FEET FROM	
THE East LINE, SE	CTION 15 TOWNSHIP 8-S RANGE 30-E NMPM.	
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	4131' GL	Chaves
<sup>16.</sup> Chec	k Appropriate Box To Indicate Nature of Notice, Report or Oth	ner Data
		REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	
	OTHER	
OTHER		
17 Describe Description of Complete	Operations (Clearly state all pertinent details, and give pertinent dates, including	antimated data of sensi 1
work) SEE RULE 1103.	Derations forearry state are pertinent actains, and give pertinent autes, the liaing	estimated date of starting any proposed

Spudded 6:30 PM 12-4-66

- 12-5-66 TD 521'. Set 8-5/8" 28# used casing at 514' and cemented with 300 sx. Cement circulated. WOC 24 hrs. Tested 8-5/8" casing to 1000# for 30 minutes. Tested 0K.
- 12-10-66 TD 3600'. Set  $4\frac{1}{2}$ " 9.5# new casing at 3587' and cemented with 500 sx. Top of cement outside of  $4\frac{1}{2}$ " casing by T.S. at 1980'. WOC 24 hrs. Tested  $4\frac{1}{2}$ " casing to 1000# for 30 minutes. Tested OK.

18. I hereby certify that the information above is frue and complet	te to the best of my knowledge and belief.	
SIGNED Clean 6 Jan	TILE Office Supervisor	DATE <u>12-28-66</u>
APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY;		