NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION		Supersedes Old
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE		511cc11vc 1-1-03
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE		State Fee X
OPERATOR		5. State Oil & Gas Lease No.
	SUMPRY MOTICES AND DEPORTS ON WELL S	minimizini.
(DO NOT USE THIS FOR USE 4	SUNDRY NOTICES AND REPORTS ON WELLS  M FOR PROPOSALS TO DELL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. **APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1.	TOTAL CAME TO THE TOTAL CONTROL OF THE TOTAL CAME TO THE TOTAL CAM	7, Unit Agreement Name
OIL X GAS WELL	OTHER.	
2. Name of Operator	3	8. Farm or Lease Name
Union Texas Petr	Crosby "17"	
3. Address of Operator	9. Well No.	
1300 Wilco Build	ing, Midland, Texas 79701	3
4. Location of Well		10. Field and Pool, or Wildcat
A	660 North 660	Cato (San Andres)
UNIT LETTER	. 660 FEET FROM THE NORTH LINE AND 660 FEET	TOM CALO (BAIL MIGLES)
Fact	17 9-G 20 E	
THE LAST LI	NE, SECTION 17 TOWNSHIP 8-S RANGE 30-E NA	MPM. (
mmmmm	15. Elevation (Show whether DF, RT, GR, etc.)	
	4129 GL	12. County Chaves
	Check Appropriate Box To Indicate Nature of Notice, Report or	Other Data
	Ti i i i i i i i i i i i i i i i i i i	
		ENT REPORT OF:
NOTIC	E OF INTENTION TO: SUBSEQUE	
PERFORM REMEDIAL WORK X  TEMPORARILY ABANDON	E OF INTENTION TO: SUBSEQUE	ENT REPORT OF:
NOTIC  PERFORM REMEDIAL WORK X	E OF INTENTION TO:  PLUG AND ABANDON REMEDIAL WORK	ENT REPORT OF:
PERFORM REMEDIAL WORK X  TEMPORARILY ABANDON  PULL OR ALTER CASING	E OF INTENTION TO:  PLUG AND ABANDON REMEDIAL WORK COMMENCE DRILLING OPHS.	ENT REPORT OF:
PERFORM REMEDIAL WORK X  TEMPORARILY ABANDON	E OF INTENTION TO:  PLUG AND ABANDON REMEDIAL WORK COMMENCE DRILLING OPNS. CHANGE PLANS CASING TEST AND CEMENT JQB	ENT REPORT OF:
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18. I hereby certify that the information above is true and comple	ste to the best of my knowledge and ballef	<del></del>	
16. I hereby Certify markine information above is true and comple	te to the best of my knowledge and belief.		
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SIGNED 19 (alley	TITLE Operations SuptWestern Area DATE	re <u>10-13-69</u>	
SIGNED DE MAILLE	TITLE Operations SuptWestern Area DATE	re <u>10-13-69</u>	
APPROVED BY	TITLE Operations SuptWestern Area DATE		
Le Station			