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NEW MEXICO OIL CONSERVATION COMMISSION

APR 11 11 34 AM '67

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State ☐ Fee ☒
5. State Oil & Gas Lease No.

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Union Texas Petroleum Corp.	8. Farm or Lease Name Crosby
3. Address of Operator 1300 Wilco Bldg, Midland, Texas	9. Well No. 9
4. Location of Well UNIT LETTER <u>L</u> , <u>1980</u> FEET FROM THE <u>south</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>9</u> TOWNSHIP <u>8-S</u> RANGE <u>30-E</u> NMPM.	10. Field and Pool, or Wildcat Cato (San Andres)
15. Elevation (Show whether DF, RT, GR, etc.) 4060 GL (Est.)	12. County Chaves

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☒
OTHER ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

Spud 1:15 p.m. 3-25-67

3-25-67 TD 545' Set 8-5/8" OD 20# new casing at 537' and cmted w/300 sx cmt circ. WOC 24 hrs. Tested 8-5/8" casing to 1000# for 30 min. Tested OK.

Reached TD 3500' at 4:15 a.m. 3-31-67

3-31-67 TD 3500', Set 4-1/2" OD 9.5# new casing at 3497' and cmted w/300 sx Top of cement outside of 4-1/2" OD casing at 2300' by T.S. WOC 24 hrs. Tested 4-1/2" casing to 1000# for 30 mins. Tested OK.

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

SIGNED [Signature] TITLE Office Supervisor

DATE 4-3-67

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: