

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
811 South First, Artesia, NM 87210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

Form C-103  
Revised March 25, 1999

<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.)		WELL API NO. 30-005-20488
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other Injection / Disposal		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator UHC NEW MEXICO CORPORATION		6. State Oil & Gas Lease No.
3. Address of Operator P.O. BOX 1956 CLEBURNE, TEXAS 76033		7. Lease Name or Unit Agreement Name:  INGRAM FEDERAL
4. Well Location  Unit Letter : 1980 feet from the SOUTH line and 660 feet from the EAST line  Section 05 Township 8S Range 31E NMPM County CHAVES		8. Well No. 002
10. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. Pool name or Wildcat TOM TOM (SAN ANDRES)

<b>11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data</b>	
<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: ATTEMPT MECHANICAL INTEGRITY TEST <input checked="" type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>

12. 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.

1. RIH WITH TUBING, BIT, AND SCRAPER TO CLEAN WELLBORE.
2. POOH WITH SAME.
3. RIH W/ TUBING AND PACKER AND SET.
4. PRESSURE TEST PACKER AND CASING TO 300#.
5. WILL NOTIFY DISTRICT OFFICE PRIOR TO CONDUCTING OPERATIONS.



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

SIGNATURE Toby D. Andrews TITLE Oil and Gas Operations Manager DATE 12/12/01

Type or print name Toby D. Andrews Telephone No. 8174775324  
(This space for State use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
Conditions of approval, if any: