

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

Form C-103  
Revised March 25, 1999

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

WELL API NO. 30-005-21163
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 Unit
8. Well No. 302
9. Pool name or Wildcat Cato (San Andres)

10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4066 G.L.	
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**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. Type of Well:  
Oil Well ☒ Gas Well ☐ Other

2. Name of Operator  
UHC New Mexico Corporation

3. Address of Operator  
P.O. Box 1956 Cleburne, Texas 76033

4. Well Location  
Unit Letter C : 1281 feet from the North line and 1358 feet from the West line  
Section 09 Township 8S Range 30E NMPM County Chaves

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
MULTIPLE COMPLETION <input type="checkbox"/>	OTHER: <input type="checkbox"/>
OTHER: Well Completion <input checked="" 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 recompilation.

12/27/00: Move in and rig up service unit.

12/28/00: Perforate 3212'-3250' with 2 spf. SDFN.

12/29/00: Acidize perforations with 5000 gal 15% gelled acid + ball sealers. Open well. Flowed back for 1 1/2 hours and died. Swab Prepare to place on pump. WO Pumping Unit and electricity.

2/7/01: Potential Test 61 BO + 89 BW + 160 MCF GOR 2623/1

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

SIGNATURE Toby D. Andrews TITLE Operations Manager DATE 12/3/01

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

APPROVED BY PAUL E. KAUTZ TITLE PETROLEUM ENGINEER DATE DEC 11 2001  
Conditions of approval, if any: