

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

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		WELL API NO. 30-005-21166
2. Name of Operator UHC New Mexico Corporation	5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
3. Address of Operator P.O. Box 1956 Cleburne, Texas 76033	6. State Oil & Gas Lease No.	
4. Well Location Unit Letter <u>J</u> : <u>1338</u> feet from the <u>South</u> line and <u>1362</u> feet from the <u>East</u> line Section <u>10</u> Township <u>8S</u> Range <u>30E</u> NMPM County <u>Chaves</u>	7. Lease Name or Unit Agreement Name: Cato San Andres Unit	
8. Well No. 334		
9. Pool name or Wildcat Cato (San Andres)		
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4088 G.L.		

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

1/23/01: Move in and rig up service unit.
1/24/01: Perforate 3379'-3400' with 2 spf. Acidize with 6000 gal 15% gelled acid + ball sealers. Open well. Flowed back 1 1/2 hours and died. Swab.
1/31/01: Set RBP @ 3373'. Perforate 3362'-3372' with 2 spf. Acidize perforations with 3000 gal 15% gelled acid. Open well. Flowed back 1 hour and died. Pull RBP and prepare to place on pump.
3/9/01: Potential Test 37 BO + 49 BW + 12 MCF GOR 324/1

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 _____ TITLE _____

Conditions of approval, if any:

ORIGINAL SIGNED BY
PAUL F. KAUTZ
PETROLEUM ENGINEER

FEB 04 2002