STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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 ☐ GAS WELL ☐ OTHER- Salt Water Disposal

7. Unit Agreement Name

2. Name of Operator: Union Texas Petroleum Corporation

8. Farm or Lease Name: Post

3. Address of Operator: 4000 N. Big Spring, Suite 500, Midland, Texas 79705

9. Well No.: 1

4. Location of Well
UNIT LETTER N, 990 FEET FROM THE South LINE AND 1650 FEET FROM THE West LINE, SECTION 1 TOWNSHIP 14S RANGE 37E NMPM.

10. Field and Pool, or Wildcat: King South (Dev)

15. Elevation (Show whether DF, RT, GR, etc.): 3831 Gr.

12. County: Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐		COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	CHANGE PLANS ☐	CASING TEST AND CEMENT JOB ☐	
OTHER Convert to SWD ☒		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 1103.

1. MIRUSU, Install BOP. POH and lay down tbg.
2. Clean out to TD 12,810'.
3. Perforate 5-1/2" casing 12,790-802' (26).
4. Acidize 12,790' to 802' w/2000 gal 15% HCl NEFE.
5. Test injection rates on all perforations.
6. Run 2-7/8" IPC tubing on Baker A-3.
   Loc-Set packer and set at 12, 650'.
7. Commence disposal.
8. RDMOSU, clean up location.

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

SIGNED _____ TITLE Regul. Compl. Coordinator DATE 2-13-85

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: