

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-025-0035T 00359

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
E-8974

7. Lease Name or Unit Agreement Name
North Anderson Ranch Unit 33

8. Well No.
3

9. Pool name or Wildcat
Anderson Ranch Wolfcamp North

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
Union Oil Co. of California

3. Address of Operator
P. O. Box 671, Midland, TX 79702

4. Well Location
Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The West Line
Section 33 Township 15-S Range 32-E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4317 D.F.

11. 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 ☒
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

*See attached procedure.

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

SIGNATURE Charlotte Beeson TITLE Drilling Clerk DATE 11-7-94

TYPE OR PRINT NAME Charlotte Beeson TELEPHONE NO. 915-685-7607

(This space for State Use)

Orig. Signed by
Paul Kautz
Geologist

NOV 10 1994

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

THE COMMISSION MUST BE NOTIFIED 24
HOURS PRIOR TO THE BEGINNING OF
PLANNING OPERATIONS FOR THE C-103
TO BE APPROVED.