

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.<br>30-025-30529                                                                        |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No.                                                                        |
| 7. Lease Name or Unit Agreement Name<br>Stansell                                                    |
| 8. Well No.<br>1                                                                                    |
| 9. Pool name or Wildcat<br>Wildcat                                                                  |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.)<br>4052.1' GR                                    |

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 Company of California

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

4. Well Location  
Unit Letter B : 660 Feet From The north Line and 1980 Feet From The east Line  
Section 13 Township 15-S Range 34-E NMPM Lea County

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"/>  |                                           | CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/> |                                               |
| OTHER: <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.

1-28: 4700' INT TO, NU BOP. LM. MUD: 10.6, 32 - - 9. R&C 109 JTS + 1 PC (4678') 9-5/8" 36# S-80 & K-55 8RD ST&C NEW ERW CSG @ 4700' W/1285 SXS PACESETTER LITE @ 12.5 PPG F/B 200 SXS "C" NEAT @ 14.8 PPG. PUMP CMT @ 10 BPM @ 0-800#. DISP PLUG W/360 BFW. BUMP PLUG TO 1500#. JC & CIP @ 8:15 PM 1-27-89. FLOAT DID NOT HOLD. CIRC 420 SXS TO SURF. WOC 4 HRS. PU BOP. SET SLIPS. CUT OFF CSG. NU CSG SPOOL. NU BOP'S, INCOMP.

1-29: 4720' DRLG. 20'/1. LM. MUD: 8.4, 28 - - 8.5. FINISH NU BOP'S. TSTD BOP'S, CK MANIFOLD & SAFETY VALVES TO 3000#, OK. RUN BIT #6 (8-1/2") TO TOC @ 4611'. TSTD 9-5/8" TO 1500#, OK. DRLD PLUG, FC & SHOE 4611-4700' F/2 HRS. OF & DA @ 5:00 AM 1-29-89. 33 HRS TOTAL WOC.

1-30: 5180' DRLG. 460'/23-3/4. LM. MUD: 8.4, 28, 10.

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

SIGNATURE Jeffery J. Tokarsky TITLE Drilling Engineer DATE 1-3-89  
TYPE OR PRINT NAME Jeffery J. Tokarsky (915) 682-9731  
TELEPHONE NO.

(This space for State Use)

Orig. Signed by  
Paul Kautz  
Geologist

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

FEB 02 1989

484 1-1-57

1-1-57

RECEIVED

FEB 1 1958

OCD  
HOBBS OFFICE