## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	Ι		
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
OPERATOR			

## OIL CONSERVATION DIVISION

	1	Form C-103 ·
DISTRIBUTION	P. O. BOX 2088	Revised 10-1-78
SANTA FE	SANTA FE, NEW MEXICO 87501	
FILE		5a. Indicate Type of Lease
U.S.O.S.	4	State X Fee
LAND OFFICE	4	5. State Oil & Gas Lease No.
OPERATOR	j	IG-1125
		mmmmmm
SUNDR	RY NOTICES AND REPORTS ON WELLS OF OSALS TO TRILL OR TO OCCIPEN OR PLUG BACK TO A DIFFERENT RES (10) FOR PERMIT -** (FORM C-101) FOR SUCH PROPOSALS.)	ERVOIR.
1.		7. Unit Agreement Name
OIL SAB WELL X	OTHER-	
2. Name of Operator		B. Farm or Lease Name
- Union Texas Petrol	eum Corporation	Amoco State
3. Address of Operator		9. Well No.
1300 Wilco Buildin	α	1
4. Location of Well	9	10. Field and Pool, or Wildcat
	000 l Nowth 6601	Wildcat
UNIT LETTER H	980' FEET FROM THE North LINE AND 660'	PEET FROM CONTINUED
East Line, secti	ION 18 TOWNSHIP 18-S RANGE 34E	
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	4072.3 GL	Lea (\\\\\\\
16.		Panaet as Other Data
	Appropriate Box To Indicate Nature of Notice,	
NOTICE OF II	NTENTION TO:	SUBSEQUENT REPORT OF:
	<u></u>	
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABAHDON	COMMENCE DRILLING O	PHS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEM	ENT JOS
<del></del>	other Report	change of operator X
OTHER		
17. Describe Proposed or Completed O	perations (Clearly state all pertinent details, and give pertinent	dates, including estimated date of starting any proposed
work) SEE RULE 1103.		
Change exerator fr	om: Santa Fe Exploration Company	
Change Operator II		
	P.O. Box 1136	
	Roswell, New Mexico 88201	
	Ma. Ilaian Marina Datumlary Carmaration	
	To: Union Texas Petroleum Corporation	

1300 Wil∞ Building

Midland, Texas 79701

18. I hereby certify that the information above is true, and complete to the best of my knowledge and belief.  **TITLE Production Services Super.**	DATE 12-19-83
ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR CONDITIONS OF APPROVAL, IF ANY:	•••• DEC 21 1093

RECEIVED

DEC 201983

O.C.D. HOBBS OFFICE