

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM
87505

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO.	30-015-26095
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	Eastland Queen Unit
8. Well Number:	24
9. OGRID Number:	265378
10. Pool name or Wildcat:	

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 type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>
2. Name of Operator: G and C Operating, LLC
3. Address of Operator: PO Box 1618 Artesia, NM 88211
4. Well Location Unit Letter C : 330' feet from the North line and 2310' feet from the West line Section 11 Township 19S Range 29E NMMPM County Eddy
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

12. 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"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input checked="" type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

5 year UIC, MIT: See Chart

Spud Date:

Rig Release Date:

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

SIGNATURE  TITLE _____ COO _____ DATE 08/31/2023

Type or print name Greg Chase E-mail address: chevyc08@hotmail.com PHONE: 575-703-6604

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

FD-2002

South District - Amarillo

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division

BRADENHEAD TEST REPORT

Operator Name <i>H. C. Operating</i>		API Number <i>30-015-26095</i>	
Property Name <i>Eastland Queen Unit</i>		Well No. <i>24</i>	

1. Surface Location									
U/Lot <i>C</i>	Section <i>11</i>	Township <i>19S</i>	Range <i>29E</i>	Feet from <i>330</i>	N/S Line <i>N</i>	Feet from <i>2310</i>	E/W Line <i>W</i>	County <i>Eddy</i>	

Well Status										
YES	TA'D WELL <input type="radio"/> YES <input checked="" type="radio"/> NO	YES	SHUT-IN <input type="radio"/> YES <input checked="" type="radio"/> NO	<input checked="" type="radio"/> INJ	INJECTOR	SWD	OIL	PRODUCER	GAS	DATE <i>8/31/2023</i>

OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Casing	(E) Tubing
Pressure	<i>0</i>			<i>0</i>	<i>0</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>CO2</i>
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>WTR</i> ✓
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>GAS</i>
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Type of Fluid
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Waterflooded
					applies

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

BHT-OK

Signature <i>[Signature]</i>		OIL CONSERVATION DIVISION	
Printed name		Entered into RBDMS	
Title		Re-test	
E-mail Address			
Date	Phone		
Witness	<i>[Signature]</i>		

INSTRUCTIONS ON BACK OF THIS FORM



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Santa Fe, NM 87505

CONDITIONS

Action 267562

CONDITIONS

Operator: G and C Operating, LLC P.O. Box 1618 Artesia, NM 88211	OGRID: 265378
	Action Number: 267562
	Action Type: [C-103] Sub. General Sundry (C-103Z)

CONDITIONS

Created By	Condition	Condition Date
gcordero	None	9/29/2023