

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC 056551

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

JO FEDERAL

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

GRAYBURG JACKSON 7-RIVER

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 21, T17S, Rge. 30E

12. COUNTY OR PARISH

EDDY

13. STATE

NM

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—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

THE EASTLAND OIL COMPANY

3. ADDRESS OF OPERATOR

P. O. DRAWER 3488, MIDLAND, TX 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

UNIT LETTER O: 1650' FEL AND 430' FSL,  
SECTION 21, TOWNSHIP 17S, RANGE 30E, EDDY CO., NM

14. PERMIT NO.

30-015-25339

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) CHANGE OF OPERATOR

(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

LEASE PURCHASED FROM FRED POOL DRILLING, INC. 09/01/90.

RECEIVED  
OCT 17 10 56 AM '90  
CARTER  
AREA  
FENS

18. I hereby certify that the foregoing is true and correct

SIGNED

*James Reed*

TITLE

PRODUCTION SUPERINTENDENT

DATE

10/15/90

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side