

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.  
30-015 ~~24926~~ **24870**

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.  
B-11539

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  
The Eastland Oil Company

3. Address of Operator  
P. O. Drawer 3488 Midland, TX 79702

4. Well Location  
Unit Letter M : 860 Feet From The South Line and 330 Feet From The West Line  
Section 9 Township 18-S Range 28E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3626' GR

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 ☒ REMEDIAL WORK ☐ ALTERING CASING ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
PULL OR ALTER CASING ☐ CASING TEST AND CEMENT JOB ☐  
OTHER: ☐ 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.

TD-2548' with 4 1/2" 10.5 lb. csg. set on bottom and cement circulated to surface.  
8 5/8" surface set @ 357' with cement circulated to surface. Perforations @  
2184' top to 2408' bottom.  
1. Set CIBP @ 2134' w/35' cement on top to 2099'.  
2. Load hole with mud laden fluid.  
3. Spot 15 sx cement @ 407' across top of salt and across 8 5/8" shoe. — Tag  
4. Spot 5 sx cement @ surface.  
5. Cut off head and install dry hole marker.

Notary N.M.O.C.C. in sufficient time to witness

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

SIGNATURE Travis Reed TITLE Consultant DATE 04/25/97

TYPE OR PRINT NAME Travis Reed

TELEPHONE NO. 915/683-6293

(This space for State Use)

APPROVED BY Jim W. Green BSR TITLE District Supervisor DATE 5-12-97

CONDITIONS OF APPROVAL, IF ANY: