

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87504

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103

Revised March 25, 1999

WELL API NO.
30-015-24926

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B11539

7. Lease Name or Unit Agreement Name:
Exxon State

8. Well No.
2

9. Pool name or Wildcat
Artesia On, GR, SA

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
3624 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
The Eastland Oil Company /

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

4. Well Location
Unit Letter M : 330 feet from the South line and 990 feet from the West line
Section 9 Township 18S Range 28E NMPM County Eddy

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☒
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

TD-2675' with 5 1/2" - 15 1/2 lb. casing set one bottom and cement circulated to surface. 8 5/8" surface set @ 379' with cement circulated.

1 - set C/BP at 2158' w/35' cmt. on top to 2123'

2 - load hole with mud laden fluid

3 - spot 40 sx cement at 429' and fill to surface

4 - cut off head & install dry hole marker

Notify OCD 24 hrs. prior to any work done

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

SIGNATURE Travis Reed TITLE Agent DATE 5-6-02

Type or print name Travis Reed Telephone No. 915-683-6293
(This space for State use)

APPROVED BY [Signature] TITLE Wild Sep ID DATE MAY 9 2002

Conditions of approval, if any: