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Submit 3 Copies To Appropriate District Office District I	State of New Me Energy, Minerals and Natu			Form C-103 Revised March 25, 1999	Ŵ
1625 N. French Dr., Hobbs, NM 88240 District H			WELL API NO. 30-015-03542	· · · · · · · · · · · · · · · · · · ·	7
811 South First, Artesia, NM 88210 District III	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		5. Indicate Type of Lease		
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87504		STATE 🔀 FEE 🗔		
1220 S. St. Francis Dr., Santa Fe, NM 87504			6. State Oil & Gas Lease No. B7717]
SUNDRY NOTICE (DO NOT USE THIS FORM FOR PROPOSAI DIFFERENT RESERVOIR. USE "APPLICAT PROPOSALS.)	ES AND REPORTS ON WELLS LS TO DRILL OR TO DEEPEN OR PET FION FOR PERMIT" (FORM (20))	TE BACK TO A		nit Agreement Name	
1. Type of Well: Oil Well XX Gas Well Other			P.J. "A" State		
2. Name of Operator The Eastland Oil Compar	8. Well No. 22		1		
3. Address of Operator	9. Pool name or Wildcat				
P.O. Box 3488, Midland 4. Well Location	Turkey Track, 7R, QN, GB, SA				
4. Wen Location	and the second	المحاجد وي			
Unit Letter <u>H</u>	2310 feet from the North	E.C. Fine and	feet from th	ne <u>East</u> line	
Section 1		nge 29-E	NMPM C	ounty Eddy	
1	 Elevation (Show whether D) 3417 GR 	R, RKB, RT, GR, etc			
	propriate Box to Indicate Na	ature of Notice, I	Report or Other Dat	ta	3
	ENTION TO: PLUG AND ABANDON	SUBS REMEDIAL WORK		RT OF:]
		COMMENCE DRIL			1
		CASING TEST AN CEMENT JOB		BANDONMENT 🗀	
OTHER:		OTHER: Per	forate and Tre	at 🗌]
 Describe proposed or complete of starting any proposed work). S or recompilation. 3-6-01- Perforate w/2 	SEE RULE 1103. For Multiple C	Completions: Attach	wellbore diagram of p	ncluding estimated dat proposed completion	te
3-8-01- Acidized perfs		% NEFE. at 3.	3 BPM at		
3-21-01-Set CIBP at 23 per ft. at 22	389' with 35' cement			S	
4-6-01- Acidize w/1000		frac with 18 d out.	,690 gals. gel	led water &	
4-9-01- Ran tubing & r	ods. Will set pumping	g unit & star	t pumping 4-12	-01.	
I hereby certify that the information ab	oove is true and complete to the b	pest of my knowledg	e and belief.	·	
SIGNATURE Janus	ied	Agent	I	DATE <u>4-11-01</u>	
Type or print name Travis Re			Telephon	e No. 915-683-62	93
(This space for State use)	ORIGINAL MONED BY TH	i W. Cum			
APPPROVED BY	DISTRICT II SUPERVINGR		D	ATE APR 2 5 20	IŢI

Conditions of approval, if any: