

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
OIL CONS. COMMISSION

SUBMIT IN TRIP  
(Other instructions  
verse side)

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

45F

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, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface  
1650' FSL and 1730' FEL

14. PERMIT NO.  
30-015-23854

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3062' GL and 3071' KB

RECEIVED

OCT 05 '87

O. C. D.  
ARTESIA, OFFICE

5. LEASE DESIGNATION AND SERIAL NO.  
NM-19842-"A"

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Federal "A"

9. WELL NO.  
1

10. FIELD AND POOL, OR WILDCAT  
Herradura Bend (Cherry Canyon)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec 28, T-22-S, R-28-E NMPM

12. COUNTY OR PARISH  
Eddy

13. STATE  
New Mexico

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

| NOTICE OF INTENTION TO: |                          | SUBSEQUENT REPORT OF:   |                                     |
|-------------------------|--------------------------|---|-------------------------------------|
| TEST WATER SHUT-OFF     | <input type="checkbox"/> | WATER SHUT-OFF  | <input type="checkbox"/>            |
| FRACTURE TREAT          | <input type="checkbox"/> | FRACTURE TREATMENT  | <input type="checkbox"/>            |
| SHOOT OR ACIDIZE        | <input type="checkbox"/> | SHOOTING OR ACIDIZING   | <input type="checkbox"/>            |
| REPAIR WELL             | <input type="checkbox"/> | (Other)   | <input type="checkbox"/>            |
| (Other)                 | <input type="checkbox"/> | (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) |                                     |
| PULL OR ALTER CASING    | <input type="checkbox"/> | REPAIRING WELL  | <input type="checkbox"/>            |
| MULTIPLE COMPLETE       | <input type="checkbox"/> | ALTERING CASING   | <input type="checkbox"/>            |
| ABANDON*                | <input type="checkbox"/> | ABANDONMENT*  | <input checked="" type="checkbox"/> |
| CHANGE PLANS            | <input type="checkbox"/> |   |                                     |

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.)

Moved in Pool Plugging Company on September 18, 1987. Pulled rods and tubing, go back with tubing to 2,599', spot 25 sx. cement w/2% CaCl, pull up hole and WOC. September 19, 1987 tag plug @ 2,389'. Circulate hole with mud laden fluid, pull to 1,600', spot 25 sx. Class H cement, pull to 500' spot 40 sx Class H cement, Circulate 8 sx to pit, this plug did as per Tom Hare instructions. Cut off well head and installed marker and cut off anchors. Will move equipment off location as soon as possible.

RECEIVED

SEP 23 11 00 AM '87

ARTESIA, OFFICE

ACCEPTED FOR FILING

SEP 28 1987

SJS

ARTESIA, OFFICE

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

SIGNED Travis Reed TITLE Production Superintendent DATE 9-22-87

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

Approved by \_\_\_\_\_  
Licensed by \_\_\_\_\_  
Signed by \_\_\_\_\_

\*See Instructions on Reverse Side