

Submit 1 Copy To Appropriate District Office

District I – (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II – (575) 748-1283
811 S. First St., Artesia, NM 88210
District III – (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV – (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised July 18, 2013

WELL API NO. 30-015-21713
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name KENWOOD FEDERAL
8. Well Number 4
9. OGRID Number 22767
10. Pool name or Wildcat SWD; SAN ANDRES

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. BOX 3488 Midland, TX 79702

4. Well Location
Unit Letter F : 1982 feet from the North line and 1980 feet from the West line
Section 6 Township 18S Range 31E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

12. 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 COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: SUBSEQUENT REPORT ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER: WELL INTEGRITY ☒

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Performed well integrity testing in accordance with OCD requirements.

Spud Date:

Rig Release Date:

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

SIGNATURE Michael Thompson TITLE Engineer DATE 9/29/22
Type or print name Michael Thompson E-mail address: mthompson@Eastland.com PHONE: 432-683-6293
For State Use Only

APPROVED BY: _____ DATE _____
Conditions of Approval (if any) Accepted for record – NMOCD gc 10/6/2022

State of New Mexico
Energy, Minerals and Natural Resources Department

Michelle Lujan Grisham
Governor

Sarah Cottrell Propst
Cabinet Secretary

Todd E. Leahy, JD, PhD
Deputy Secretary

Adrienne Sandoval, Division Director
Oil Conservation Division



Date: 7-8-22

API# 30-019-21713

A Mechanical Integrity Test (M.I.T.) was performed on, Well Kennwood Fed SMD 4

☒ M.I.T. is **successful**, the original chart has been retained by the Operator on site. Submit a **legible** scan of the chart with an attached **Original C-103Z Form** indicating reason for the test. A scanned image will appear on line via NMOCD website.

☐ M.I.T. is **unsuccessful**, the original chart is returned to the Operator. Repairs will be made; Operator is to schedule for a re-test within a 90-day period. If this is a test of a repaired well currently in non-compliance, all dates and requirements of the original are still in effect.
No expectation of extension should be construed because of this test.

☐ M.I.T. for **Temporary Abandonment**, shall include a detailed description on **Form C-103**, including the location of the CIBP and any other tubular goods in the well including the Operator's request for TA status timeline.

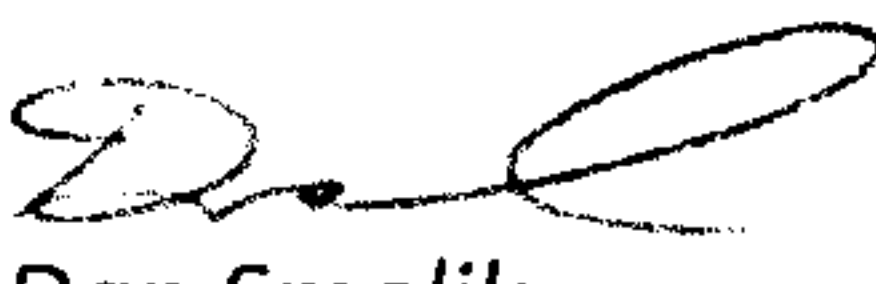
☐ M.I.T. is **successful**, after the secondary request of a scheduled M.I.T. is performed. Therefore, Operator has within a 30-day period from the M.I.T. to submit a current C-103 along with a legible scan of the Chart, including a detailed description of the repair(s). **Only after receipt of the C-103 will the non-compliance be closed.**

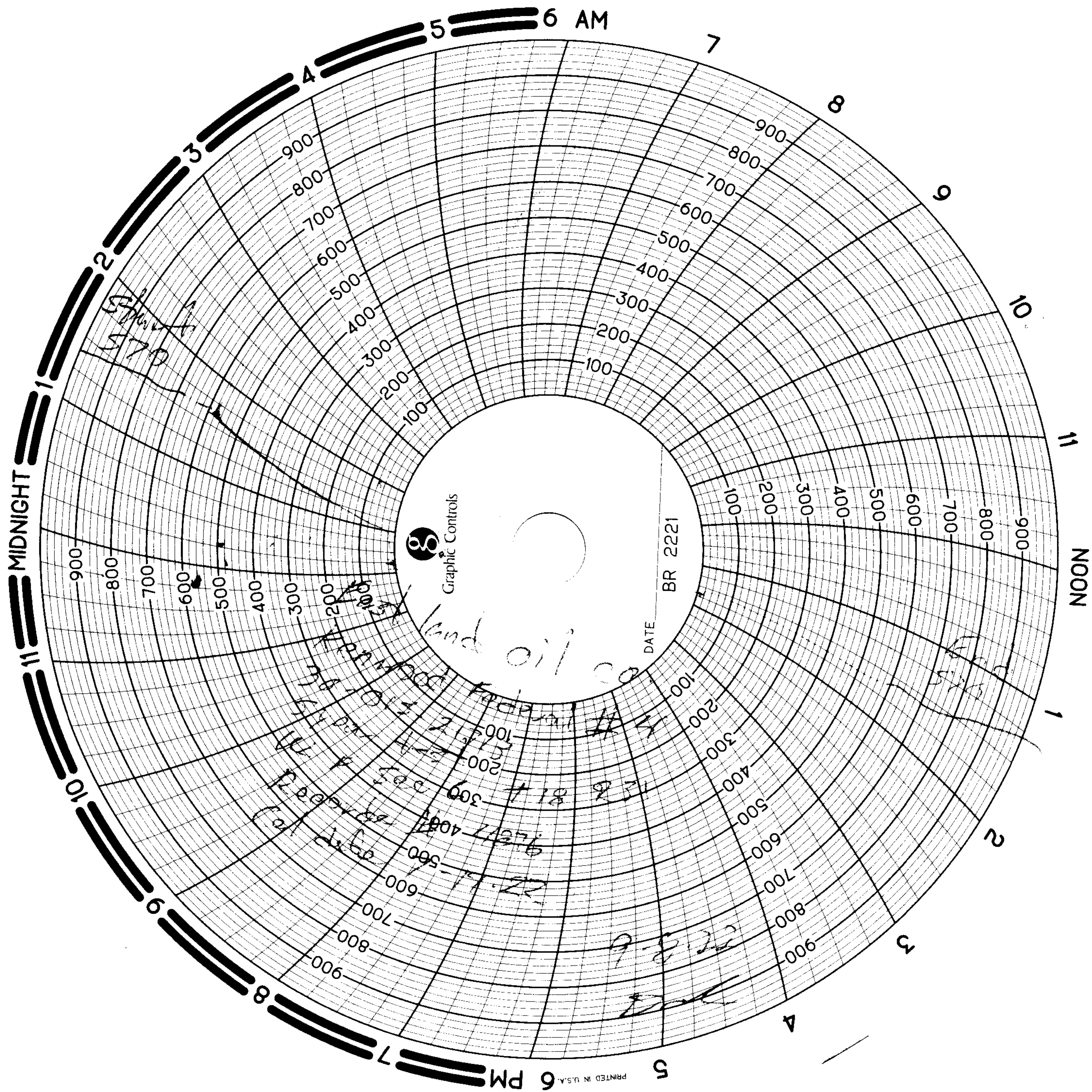
☐ M.I.T. is **successful**, Initial of an injection well, you must submit a **form C-103** to NMOCD within 30 days. A **C-103 form** must include a detailed description of the work performed on this well Including the position of the packer, tubing Information, the date of first Injection, the tubing pressure and Injection volume.

Please ensure all documentation requirements are in place prior to injection process.

If I can be of additional assistance, please feel free to contact me at (575) 626-0836

Thank You,


Dan Smolik
EMNRD-O.C.D.
South District



District I
1625 N. French Dr., Hobbs, NM 88240
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CONDITIONS

Action 147551

CONDITIONS

Operator: EASTLAND OIL CO P.O. Box 3488 Midland, TX 79702	OGRID: 22767
	Action Number: 147551
	Action Type: [C-103] Sub. General Sundry (C-103Z)

CONDITIONS

Created By	Condition	Condition Date
gcordero	None	10/7/2022