Submit 3 Copies to Appropriate District Office

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

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO. 30-025-25316

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No. 23286

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.)

7. Lease Name or Unit Agreement Name: TENNECO SUNSHINE

1. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER

8. Well No. 001

2. Name of Operator: ECLIPSE OIL & GAS, INC.

9. Pool name or Wildcat: BAGLEY PERMO PENN. NORTH

3. Address of Operator: P.O. BOX 15122, ODESSA, TX 79768

4. Well Location
Unit Letter P : 1980 Feet From The SOUTH Line and 660 Feet From The EAST Line

Section 1 Township 12S Range 32E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4317' GL

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.

#1. CIBP @ 9145' cap w/ 20' cement

#2. 25 sks of cement @ 6150'

#3. Cut & remove 5 ½ csg. = or - 3900'

#4. 25 sks of cement @ 50' in & 50' out of 5 ½ CSG cut WOC & tag.

#5. 50 sks. Of cement @ 3800' WOC & tag

#6. Cut & remove 8 5/8 CSG. IF ANY FREE

#7. 50 sks of cement 50' in & out of 8 5/8 CSG cut WOC & tag

#8. 75 sks of cement @ 402' WOC & tag

#9. 10 sks. surface plug.

Cut off Well head & anchors 3' BGL. Install dryhole marker.

Well to be circ. W/ 10# brine w/25# of gel per bbl.

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

SIGNATURE [signature] TITLE PRESIDENT DATE 5-21-98

TYPE OR PRINT NAME RICHARD BEESON TELEPHONE NO. 915-550-8818

(This space for State Use) ORIGINAL SIGNED BY CHRIS WILLIAMS DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JUN 01 1998

CONDITIONS OF APPROVAL, IF ANY: