

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

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

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-31348
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  GOOD TEXIAN
8. Well No. 1
9. Pool name or Wildcat EAST CAPROCK DEVONIAN

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> 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 <u>G</u> : <u>1980</u> Feet From The <u>NORTH</u> Line and <u>1980</u> Feet From The <u>EAST</u> Line Section <u>26</u> Township <u>12-S</u> Range <u>32-E</u> NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4320 GR, 4334 KB	

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 ☐  
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.

TD intermediate hole (11") @3704' KB elevation. Ran 86 jts of 24 lb. and 32 lb. 8-5/8" J-55 casing. Set @3704' KB elevation. Cement casing w/1200 sx lite and Tail in w/200 sx premium plus w/2% CaCl. Plug down @10:35 A.M. 8-22-91. Float held O.K. Circulated cement to surface w/136 sx excess to pit. WOC 18 hrs NUBOP. Pressure test casing to 1000 psi ok.

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

SIGNATURE Travis Reed TITLE Production Superintendent DATE 8/27/91  
TYPE OR PRINT NAME TRAVIS REED TELEPHONE NO. 915/683-6293

(This space for State Use)

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

CONDITIONS OF APPROVAL, IF ANY: