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State of New Mexico

Form C-103

Energy, minerals and Natural Resources Department District Office Revised 1-1-87 DISTRICT I OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 WELL API NO. P.O. Box 2088 30-025-31348 DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease FEE XX STATE DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: WELL X GOOD TEXIAN OTHER 2. Name of Operator 8. Well No. THE EASTLAND OIL COMPANY 3. Address of Operator 9. Pool name or Wildcat P. O. DRAWER 3488, MIDLAND, TX 79702 EAST CAPROCK DEVONIAN Well Location Unit Letter ___ ; __ 1980 Feet From The ____ NORTH 1980 Line and _ Feet From The __ EAST Township T-12-S Range R-32-E **NMPM** LEA County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4320 GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. 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 X 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. Spudded 172' hole @9:30 PM August 16, 1991, and drilled to 460'. Ran 11 jts 13-3/8" 48#, H-40, csg. set @460'. Cemented w/450 sx Class C cement w/2% CaCl2. Circulated 125 sx excess to pit. Cement in place @8:00 AM August 17, 1991. Allowed cement to set 12 hrs. Nippled up 13-3/8" head & BOP. Tested csg. @500 psi for 30 minutes with no leak off.

MINIMUM WOC 18HRS

I hereby certify that the information above is true and complete to the best of my knowled	ge and belief.	
SIONATURE PRICEIS LUICE	Production Superintendent	DATE 8/20/91
TYPEORPRINT NAME Travis Reed		TELEPHONE NO. 915/683-6293
(This space for State Use) Unity, Signed by Paul Kautz Geologict		100
APPROVED BY Geologist	- TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		