

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

00 JUL 17 1999 SUNDAY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

5. Lease Designation and Serial No.

NM-99705

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Eagle Springs "8" Fed.#2M

9. API Well No.

30-043-20950

10. Field and Pool, or Exploratory Area

Wildcat Mancos

11. County or Parish, State

Sandoval, New Mexico

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Penwell Energy, Inc.

3. Address and Telephone No.

600 N. Marienfeld, Ste. 1100; Midland, TX. 79701 915 683-2534

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

330' FNL & 2,310' FEL Section 8 - T19N - R4W

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Correct Legal Description

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

Approved 3160-3 reads Section 8 - T20N - R4W.

Correct legal description is Section 8 - T19N - R4W. All other references to legal description in approved APD material is correct.

Please change APD to reflect correct legal description.

already changed

COF



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

Signed Bill Pierce Bill Pierce Title Manager of Operations Date July 13, 2000

(This space for Federal or State office use)

Patricia M. Hester

Lands and Mineral Resources

Approved by _____ Title _____ Date JUL 21 2000
Conditions of approval, if any: