Submit 1 Copy To Appropriate District State of New Mexico EMNRD-OCD ARTESIA Form C-103
Office Energy, Minerals and Natural Resources REC'D: 8/07/2020 Revised July 18, 2013
I625 N. French Dr., Hobbs, NM 88240 WELL API NO. District II – (575) 748-1283 OH CONSERDMATION DIVISION 30-015-26171
811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION 5. Indicate Type of Lease 5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fa NIM 87505
1220 S. St. Francis Dr., Santa Fe, NM
87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name
(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 Injection SWD 8. Well Number #1
2. Name of Operator PENROC OIL CORP 9. OGRID Number 17213
3. Address of Operator P.O. Box 2769 Hobbs, NM 88240 10. Pool name or Wildcat SWD; DELAWARE
4. Well Location
Unit Letter K : 1980 feet from the SOUTH line and 1980 feet from the WEST line
Section 36 Township 22S Range 31E NMPM EDDY County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)
GL 4366'
12. 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. PAND A
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB OWNHOLE COMMINGLE
CLOSED-LOOP SYSTEM
OTHER: OTHER: 5 YEAR MIT TEST 13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated dat
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.
PENROC OIL CORPORATION, is respectfully submitting attached MIT Test results for the referenced well.
Test Date: 8-04-2020
Result: Pass
Well must hold 500 PSI for 30 minutes
Redo test at 500 PSI
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 CHARD TITLE PRESIDENT DATE 8-6-2020
Type or print nameM.Y. Merchant E-mail address:mymerch@penrocoil.com PHONE:575-492-1236 For State Use Only
APPROVED BY: Dan mole TITLE Compliance Officer DATE 8-11-2020

