

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT ORIGINAL
WITH INSTRUCTIONS ON RE-
VERSE SIDE
Drawer DD
Artesia, NM 89210

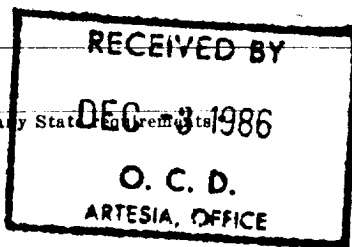
Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

clsf

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" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. LC-068127
2. NAME OF OPERATOR Penroc Oil Corporation ✓	6. IF INDIAN, ALLOTTEE OR TRIBE NAME -----
3. ADDRESS OF OPERATOR P O Drawer 831, Midland, Texas 79702	7. UNIT AGREEMENT NAME -----
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1650' FWL, 2050' FSL	8. FARM OR LEASE NAME Elliott Federal
14. PERMIT NO.	9. WELL NO. 3
15. ELEVATIONS (Show whether DF, RT, GM, etc.) 3656.4' GR	10. FIELD AND POOL, OR WILDCAT Linda San Andres
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 29-6S-26E
	12. COUNTY OR PARISH Chaves
	13. STATE NM



Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

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

17. WORKER 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.)*

- 6-6-85 Rig up plugging unit. Tag TD @ 1018'. Pump 25 sks. cement and displace. Pull out of hole.
- 6-7-85 Run tubing to tag and tagged at 976'. Formation took most of cement. Prepare to pump another 25 sks. cement plug. Shut down for week-end.
- 6-10-85 Pumped 25 sks. cement and displace. Pull out of hole.
- 6-11-85 Go in hole with tubing to tag and tagged cement at 665'. Pumped 8 bbls. 10# bentonite mud. Pulled tubing to 130' from surface. Pumped 10 sks. cement. Set dry-hole marker.

After all surface equipment removed and prescribed surface restoration completed, will notify for final inspection and approval.

Post ID-2
8-23-85
P+H

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

SIGNED [Signature] TITLE President DATE 6-30-85

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY: Approved as to plugging of the well bore. Liability under bond is retained until surface restoration is completed.

*See Instructions on Reverse Side

APPROVED
PETER W. CHESTER
NOV 26 1986
BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

