

(C) W - Artesia
UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.
-L.C. 060398

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation
W Henshaw Program

8. Well Name and No.
TR. 1, WELL NO. 2

9. API Well No.
30-015-0386

10. Field and Pool, or Exploratory Area
HENSHAW GRAYBERG WE

11. County or Parish, State
EDDY, NM

SUNDRY 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

SUBMIT IN TRIPLICATE

1. Type of Well
 Oil Well Gas Well Other **INJECTION**

2. Name of Operator
PENROC OIL CORPORATION

3. Address and Telephone No.
P.O. BOX 5970, HOBBS, NM 88241 (505) 397-3596

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1980 FSL, 1980 FWL, Sec. 4, T16S, R. 30 E

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion or other 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.)

Based on production testing results on Tr. 1 well No. 4 (API # 30-015-03852) i we will file 3160-5 for returning the well to active injector - if 1-4 is not successful, will set CRBP above perms. and load/test for csg. integrity.

NOV 08 1994
O. C. D.
AREA OFFICE

RECEIVED
OCT 5 11 08 AM '94
CARLSON
AREA HEADQUARTERS

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

Signed *Joe G. Lara* Title PRESIDENT Date 10.04.94

(This space for Federal or State office use)

Approved by (ORIG. SGD.) JOE G. LARA Title PETROLEUM ENGINEER Date 11/7/94

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

BR