SIGNED .\_

SUBMIT IN DUPLICA UNI TO STATES

structions on

Form approved. Budget Bureau No. 42-R355.5.

11/14/75

DATE \_

DEPARTMEN OF THE INTERIOR

5. LEASE DESIGNATION AND SERIAL NO. reverse side) GEOLOGICAL SURVEY NM-0473362 6. IF INDIAN, ALLOTTEE OR TRIBE NAME WELL COMPLETION OR RECOMPLETION REPORT AND LOG\* 1a. TYPE OF WELL: DRY X 7. UNIT AGREEMENT NAME Other . RECEIVED b. TYPE OF COMPLETION: WORK OVER PLUG BACK NEW WELL DEEP-EN DIFF. CESVR. S. FARM OR LEASE NAME Other . U S A 2. NAME OF OPERATOR NOV 19 1975 9. WELL NO. Penroc Oil Corporation 1 3. ADDRESS OF OPERATOR a. c. c. 10. FIELD AND POOL, OR WILDCAT P. O. Drawer 831, Midland, Texas 79701 C. C. J. L. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) PSIA, OFFICE Winchester / 1980' FNL & 1980' FEL 11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA At top prod. interval reported below Sec. 35-19S-28E At total depth 14. PERMIT NO. 13. STATE DATE ISSUED 12. COUNTY OR PARISH Eddy N. M. 15. DATE SPUDDED 16. DATE T.D. REACHED | 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DF, REB, RT, GR, ETC.)\* 19. ELEV. CASINGHEAD 9/29/75 P&A 11/4/75 3302.2 GR 11/3/75 20. TOTAL DEPTH, MD & TVD 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY\* 23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS 0-10,485' 10,485 24. PRODUCING INTERVAL(S), OF THIS COMPLETION-TOP, BOTTOM, NAME (MD AND TVD) WAS DIRECTIONAL SURVEY MADE 26. TYPE ELECTRIC AND OTHER LOGS RUN 27. WAS WELL CORED No Compensated Neutron-Density & Dual Laterolog 28 CASING RECORD (Report all strings set in well) DEPTH SET (MD) HOLE SIZE CEMENTING RECORD CASING SIZE WEIGHT, LB./FT. AMOUNT PULLED 13 3/8" 457' 17" 450 sx 48# None 8 5/8" 24 32# 25001 11" 1370 None 29 LINER RECORD 30. TUBING RECORD 8121 BOTTOM (MD) TOP (MD) SACKS CEMENT SCREEN (MD) DEPTH SET (MD) PACKER SET (MD) 31. PERFORATION RECORD (Interval, size and number) ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED 33.\* PRODUCTION DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping-size and type of pump) WELL STATUS (Producing or shut-in) DATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR OIL-BBL. GAS-MCF. WATER-BBL. GAS-OIL BATIO TEST PERIOD FLOW. TUBING PRESS. CASING PRESSURE CALCULATED OIL-BBL. GAS-MCF WATER GRAVITY-API (CORR.) 24-HOUR RATE 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) 35. LIST OF ATTACHMENTS 2 each Compensated Neutron Density & Dual Laterolog, 36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

TITLE

President