

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Artesia, NM 88210

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 Form 9-331-C for such proposals.)

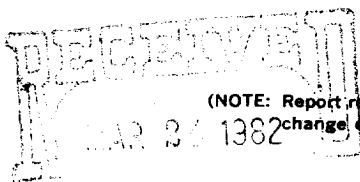
1. oil ☐ gas ☐ other Depleted Gas Well
2. NAME OF OPERATOR
Penroc Oil Corporation ✓
3. ADDRESS OF OPERATOR
P. O. Drawer 831, Midland, Texas 79702
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' fNL, 1980' fEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☒
☐
☐
☒



(NOTE: Report results of multiple completion or zone change on Form 9-330.)

OIL & GAS
U.S. GEOLOGICAL SURVEY
LOS WELLS, NEW MEXICO

17. 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.)*
(Refer to 9-331 dated 1-1-82)

1. 3-09-82 Set CIBP @ 9300' and dump bailer 50' cement on top.
2. 3-10-82 Cut off 4 1/2", 11.60#, N-80 casing @ 7192'. Pull casing.
3. 3-12-82 Set 150' cement plug 7260'-7110' in and out of 4 1/2" csg. stub.
4. 3-13-82 Set 100' cement plug 4302'-4202' across top Bone Spring.
5. " Set 100' cement plug 2550'-2450' (50' in and out of 8 5/8" casing set @ 2500').
6. " Set 15 sack cement plug in top 8 5/8" csg w/dry hole marker in place.

Will advise when surface stipulations have been met for final inspection and approval.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED B. J. Dally TITLE President DATE 3-23-82

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

