

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.

30-015-23462

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

State IZ Com.

8. Well No.

1

9. Pool name or Wildcat

Wildcat Dark Canyon Delaware

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"  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL  
WELL ☐

GAS  
WELL ☐

OTHER P & A

2. Name of Operator

Penwell Energy, Inc. OGRID #147308

3. Address of Operator

600 N. Marienfeld, Ste. 1100, Midland, Tx 79701

4. Well Location

Unit Letter F : 1880 Feet From The North Line and 1980 Feet From The West Line

Section 31

Township 23S

Range 25E

NMPM

Eddy

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3831 GR

11.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☒

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1. Set CIBP @ 4,400' & cap w/10 sks. of cmt.
2. Displace hole w/10# plug mud.
3. Cut csg. @ 3200'. TOC by CBL 3240'. Pull csg.
4. Spot 50 sk. cmt. plug @ 3200'.
5. Spot 100 sk. plug @ 2760' at btm of 8 5/8" intermediate csg.
6. Spot 50 sk. plug @ 1600'.
7. Spot 50 sk. plug @ 400' WOC 4 hrs. & tag plug.

RECEIVED

JUN 11 1996

OIL CON. DIV.  
DIST. 2

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

*Brenda Goffman*

TITLE

Production Analyst

DATE June 10, 1996

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*Richard D. [Signature]*