State of New Mexico Form C-103 Submit 3 Copies to Appropriate District Office y, Minerals and Natural Resources Departm Revised 1-1-89 OIL CONSERVATION DIVISION DISTRICT I WELL API NO. P.O. Box 1980, Hobbs, NM 88240 310 Old Santa Fe Trail, Room 206 30-015-29714 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe. New Mexico 87503 5. Indicate Type of Lease FEE X STATE DISTRICT III 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 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" AP (FORM C-101) FOR SUCH PROPOSALS INDIAN DRAW "13" Type of Well: GAS WELL WELL OTHER 2. Name of Operator 8. Well No. PENWELL ENERGY, INC. (BILL PIERCE) 915-683-2534 9. Pool name or Wildcat Address of Operator SUITE 1100 MIDLAND, TEXAS 79701 CARLSBAD MORROW SOUTH 600 NORTH MARIENFELD Well Location 1980' WEST * 1980' SOUTH Feet From The Line and Feet From The Unit Letter 27E **EDDY** 22S 13 **NMPM** Range County Section Township 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3088' GR. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: ALTERING CASING PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK COMMENCE DRILLING OPNS. PLUG AND ABANDONMEN **CHANGE PLANS TEMPORARILY ABANDON** CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** OTHER: 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. Penwell energy, Inc. requests the approval to alter the production casing program, to run a Liner from 5600' to TD. 2. 9 5/8" 43.5# N-80 casing is set at 5850' and cement was circulated. 3. Production liner will be $5\frac{1}{2}$ " 17 & 20# S-95 &P-110.

I hereby certify that the inform	nation above is true and complete, to the best of my knowledge and bel	ief.		
SIGNATURE	o T fancia_m	LE Agent	DATE 09/12/97	
TYPE OR PRINT NAME		TELEF	HONE NO.	_
(This space for State Use)	ORIGINAL SIGNED BY TIM W. GUM DISTRICT II SUPERVISOR		OCT 2 0 1997	

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY-