

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources
HOBBS OCD
 OIL CONSERVATION DIVISION
 JUN 06 12 20
 1220 South St. Francis Dr.
 Santa Fe, NM 87505
RECEIVED

Form C-103
 Revised July 18, 2013

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.)		WELL API NO. 30-025-11457
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease Federal STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator PENROC OIL CORPORATION		6. State Oil & Gas Lease No.
3. Address of Operator PO BOX 2769, HOBBS, NM 88241		7. Lease Name or Unit Agreement Name Langlie Jal Unit
4. Well Location Unit Letter <u>E</u> : <u>1980</u> feet from the <u>North</u> line and <u>660</u> feet from the <u>West</u> line Section <u>5</u> Township <u>25S</u> Range <u>37E</u> NMPM Lea County		8. Well Number <u>48</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3241 GL		9. OGRID Number <u>17213</u>
10. Pool name or Wildcat Langlie Mattix; 7 Rivers-Queen -Grayburg		

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input checked="" type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT F REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: _____		INT TO PA <input checked="" type="checkbox"/> P&A NR _____ P&A R _____
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13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Previous operator(s) have reported drilling out CIBP and returning this well to production in January 2014. Based on files (including NMOCD) well produced 21 bo in Jan 2014 and nothing since then. There is no surface equipment on the well. Plans are to RU, confirm PBTB. If no plug, set CIBP @ 3285'. PU 3285' of work string. Circulate hole w/ 10# gelled brine. TOH. Perforate squeeze holes @ 1800'. Squeeze 30 sxs Class 'C'. Perforate squeeze holes @ 1210' and squeeze 30 sxs. Set surface 10 sxs. Surface plug. Cut off well head. RD. Cut off anchors. Install DHM. Clean location.

Spud Date: *

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

SIGNATURE [Signature] TITLE President DATE 06/06/2016

Type or print name M.Y. Merchant E-mail address: mymerch@penrocoil.com PHONE: 575-492-1236

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

FOR RECORD ONLY
 Pending approval from BLM
 mwloas 6/7/16

LJU#48

30-025-11457

PRESENT

AFTER P&A

