

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

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

HOBBS OCD
OCT 11 2016
RECEIVED

WELL API NO. 30-025-27842
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Langlie Jal Unit
8. Well Number 97
9. OGRID Number 17213
10. Pool name or Wildcat Langlie Mattix; 7 Rivers-Queen -Grayburg
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3250 GL

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

2. Name of Operator
PENROC OIL CORPORATION

3. Address of Operator
PO BOX 2769, HOBBS, NM 88241

4. Well Location
 Unit Letter P : 140 feet from the South line and 1200 feet from the East line
 Section 32 Township 24S Range 37E NMPM Lea County

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

NOTICE OF INTENT PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>	INT TO PA P&A NR <u>Pm. X</u> P&A R _____	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>
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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.

- 9-30-16 Set CIBP @ 3240'.
- 10-3-16 Tag CIBP @ 3240'. Well would not circ. Spot 45sx @ 3240'. Tag @ 3207'. Spot 40sx per Mark Whitaker @ 3207'.
- 10-4-16 Tag @ 2820'. Load hole test csg to 500 psi w/no loss. Spot 25sx @ 916'. Tag @ 710'. Perf @ 250'. Circ 70sx cement to surface in 5 1/2" x 8 5/8". RDMO.
- 10-7-16 Moved out all equipment. Install DH marker. Removed anchors. Cleaned location.

Spud Date:

Approved for Plugging of wellbore only. Liability under bond is retained pending restoration and completion of the C-103, Specific for Subsequent Report of Well Plugging, which may be found on the OCD web page under forms.

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

SIGNATURE [Signature] TITLE President DATE 10/08/2016

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

For State Use Only

APPROVED BY: [Signature] TITLE P.E.S. DATE 10/11/2016
 Conditions of Approval (if any):