

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
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO.
30-025-22988

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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 SWD

2. Name of Operator
PENROC OIL CORPORATION

3. Address of Operator
P.O. BOX 5970, HOBBS, NM 38241-5970

4. Well Location
Unit Letter F : 1980 Feet From The NORTH Line and 1965 Feet From The WEST Line

Section 30 Township 9S Range 34E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4299.8

7. Lease Name or Unit Agreement Name

TANKERSLEY

8. Well No.
3

9. Pool name or Wildcat
SWD: Syron
VADA PENN <96185>

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: CONVERSION TO SWD ☒

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.

6-19-95 - 6-21-95
PER NMCD ORDER # SWD-593, INFORMED HOBBS DISTRICT 6/19/95 (BONNIE), RU
WSU LD RODS, PUMP AND TBG. PU 5 1/2 PC MODEL 'R' SINGLE GRIP PACKER. PU
9691' OF SEAL TITE 2 7/8" TBG. LEFT PACKER SWINGING. PUMPED 100 BBLs
TREATED WATER. SONNY'S TRUCK BROKE DOWN. SDN. 6/21/95 MIXED 250 BBLs
OF FRESH WATER W/2 DRUMS OF PKR FLUID. CLEARED ANNULUS. SET PACKER AT
9693'. LOADED AND PRESSURED BACKSIDE TO 500#, 15 MINUTES - OK. CHART
ATTACHED. TBG ON VACUUM. FINAL REPORT.

*Ref 9700 7052.
per Series 6-20-95*

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

SIGNATURE [Signature] TITLE ASSISTANT TO THE PRES. DATE 6/23/95

TYPE OR PRINT NAME D. DENISE MOHAR M. Y. MERCHANT TELEPHONE NO. 505-397-3596

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JUN 26 1995

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

JUN 29 1945

RECORDS
OFFICE

SEP 14 1945

