

CCD-Hobbs

Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

5. Lease Designation and Serial No.
NMLC 067230

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
Federal 3#2

9. API Well No.
30-025-25701

10. Field and Pool, or Exploratory Area
Lusk Bone Spring

11. County or Parish, State
Lea

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
PENROC OIL CORPORATION

3. Address and Telephone No.
P.O. Box 5970, HUBBS, NMA 88241

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
NW1/4SE1/4 SEC 3, T19S, R32E
1980' FSL + 1730' FEL

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
- ☐ Subsequent Report
- ☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
- ☐ Recompletion
- ☐ Plugging Back
- ☐ Casing Repair
- ☐ Altering Casing
- ☐ Other

- ☐ Change of Plans
- ☐ New Construction
- ☐ Non-Routine Fracturing
- ☐ Water Shut-Off
- ☐ Conversion to Injection
- ☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

During the second quarter 2000, plan to rig up workover rig. Check for tubing in the hole. Pull work string - drill out CIBP and test the Bone Springs & Wolfcamp pays previously abandoned. If necessary, install artificial lift.

TA Approved 6
8/29/2000

RECEIVED
2000 JAN 32 A 11:45
BUREAU OF LAND MGMT.
HOBBS, NEW MEXICO

4. I hereby certify that the foregoing is true and correct

Signed Welford Title Phide

(This space for Bureau or State Office use)

Approved by
Conditions of approval, if any:

Title _____ Date 2/29/2000

