Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

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OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe. New Mexico 87504-2088

WELL API NO. 30-025-28004

P.O. Drawer DD, Artesia, NM 88210	5. Indicate Type of Lease STATE FEE :
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	6. State Oil & Gas Lease No. 4 - 4 6 3 4
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.)	7. Lease Name or Unit Agreement Name
1. Type of Well: OIL GAS WELL WELL X OTHER	DIVINE 29' STATE
2. Name of Operator PENROC OIL CORPORATION	8. Well No.
3. Address of Operator P.O.Box 5970 Hobbs, NM 88241-5970	9. Pool name or Wildcat EUMONT YATES 7-RIVERS
4. Well Location Unit Letter :	30 Feet From The EAST Line
7.	VMPM LEA County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	WITH
Check Appropriate Box to Indicate Nature of Notice, Re NOTICE OF INTENTION TO: SUBS	eport, or Other Data SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON K	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING	OPNS PLUG AND ABANDONMENT
PULL OR ALTER CASING CASING TEST AND CEI	MENT JOB
OTHER: OTHER:	
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, includwork) SEE RULE 1103.	
Well data: 85/8", 24" @ 393' w/ 220 SXS. CMT. CIRC. 51/2", 14" @ 3959' w/ 750 SXS. CMT CIRC	TO SURFACE TO SURFACE
Pars + 3822' - 3950' (2spf, 136 holes)	
of the way well servicing unit Pull & LD roc	15 & pump. (May have to fish)
(1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	8 SEL 3/2 CINI C 3 1201
A TELECT	Diffice. Open and a second
1 1000 1000 OUIL UD & 500T 25 3x. Plus	30-400. 3/000 / C
Install dry hole marker. Cut anchors. Clean up	location Move salvage to
yard.	
I hereby certify that the information above is true and complete to the best of my knowledge and belief. SKINATURE LEAGUE HELL NECKLOWER TITLE	BATE 3/16/92
TYPE OR PRINT NAME M. Y. (Merch) Merchant	(505)397-3596 Telephone no.
(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON	MAR 1 6
DISTRICT I SUPERVISOR TITLE	DATE

CONDITIONS OF APPROVAL, IF ANY:

THE COMMISSION AND THE PART OF THE PART OF

MAR 1 6 1992 OCD HOBBS OFFICE

RECEIVED