

JUN 12 2017

Form C-129
RECEIVED Revised August 1, 2011
 Submit one copy to appropriate
 District Office

(See Rule 19.15.18.12 NMAC and Rule 19.15.7.37 NMAC)

- 30-D15-31530

Date _____

* Gas-Oil ratio test may be required to verify estimated gas volume.

<u>API</u>	<u>Well Name</u>	<u>Well Number</u>
30-015-31530	ENRON STATE	#001
30-015-31920	ENRON STATE	#002
30-015-32162	ENRON STATE	#004
30-015-35050	ENRON STATE	#012
30-015-36979	ENRON STATE	#014
30-015-36978	ENRON STATE	#015
30-015-38512	ENRON STATE	#016
30-015-39996	ENRON STATE	#017
30-015-40339	ENRON STATE	#018
30-015-41833	ENRON STATE	#019
30-015-42372	ENRON STATE	#020
30-015-42156	ENRON STATE	#021