

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

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

WELL API NO.	30 015 27703
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	L-5229-6
7. Lease Name or Unit Agreement Name	James Ranch Unit
8. Well No.	37
9. Pool name or Wildcat	Quahada Ridge Delaware, SE
4. Well Location	Unit Letter <u>I</u> : <u>1980</u> Feet From The <u>south</u> Line and <u>660</u> Feet From The <u>east</u> Line Section <u>36</u> Township <u>22S</u> Range <u>30E</u> NMPM <u>Eddy</u> County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3310.2' GR

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
Enron Oil & Gas Company

3. Address of Operator
P. O. Box 2267, Midland, Texas 79702

4. Well Location
Unit Letter I : 1980 Feet From The south Line and 660 Feet From The east Line
Section 36 Township 22S Range 30E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3310.2' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF: 11/1/93	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

11-6-93 TD 7778'

11-7-93 Ran 25 joints 5-1/2" 17.0# J-55 LT&C & 165 joints 5-1/2" 15.50# J-55 LT&C casing set at 7778'.

11-8-93 Cemented with 400 sacks PSL "C" (65:35:6) + .3% CF-141 + 6# salt, 12.4 ppg, 2.08 cuft/sx (148 bbls slurry) and 415 sacks "H" + 8# CSF + .5% CF-14, 14.1 ppg, 1.62 cuft/sx (120 bbls slurry). Temperature Survey top of cement 3200'.

WOC - 18-1/2 hours

30 minutes pressure tested to 2000 psi, OK.

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

SIGNATURE Betty Gildon TITLE Regulatory Analyst DATE 11/9/93
915/686-3714
TELEPHONE NO.

TYPE OR PRINT NAME Betty Gildon

(This space for State Use) ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NOV 12 1993