

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 26279

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

2. Name of Operator  
Enron Oil & Gas Company

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

4. Well Location  
Unit Letter J : 2130 Feet From The south Line and 1650 Feet From The east Line  
Section 2 Township 24S Range 28E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
2974.4' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF: 3/7/90	
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.

3-17-90 - Ran 4-1/2" liner to 12,047'. Top of Liner 10,171.26'

4-1/2" 15.10# P-110 Cemented with 10 bbls SAM IV followed by 260 sx Class H w/6/10% gas stop, 5 lbs/sx KCL, 5/10% CFR-3 and 6/10% Halad 22-1, followed by 10 bbl SAM IV & 88 bbls 12.5# mud.

WOC - 21-1/4 hours. 30 minutes pressure tested to 900 psi.

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

Regulatory Analyst  
Betty Gilden  
DATE 3/19/90  
(915) 686-3714  
TELEPHONE NO.

ORIGINAL SIGNED BY  
MIKE WILLIAMS  
SUPERVISOR, DISTRICT II  
APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

MAR 21 1990