Submit 3 Copies to Appropriate District Office

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

State of New Mexico
Energy, Minerals and Natural Resources Department

# OIL CONSERVATION DIVISION

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

Form C-103
Revised 1-1-89

c/sf
dp

WELL API NO.
30 015 28623

5. Indicate Type of Lease STATE XX FEE

6. State Oil & Gas Lease No.
E-4229-4

## 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
James Ranch Unit (4060)

1. Type of Well: OIL WELL [X] GAS WELL [ ] OTHER

2. Name of Operator
Enron Oil & Gas Company (7377)

8. Well No.
16

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

9. Pool name or Wildcat Undes Quahada Ridge Delaware, S.E. (50443)

4. Well Location
Unit Letter H : 1980 Feet From The north Line and 330 Feet From The east Line

Section 36 Township 22S Range 30E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3313' GR

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

| NOTICE OF INTENTION TO: | | | | SUBSEQUENT REPORT OF: 3/19/96 | | | |
|---|---|---|---|---|---|---|---|
| PERFORM REMEDIAL WORK | [ ] | PLUG AND ABANDON | [ ] | REMEDIAL WORK | [ ] | ALTERING CASING | [ ] |
| TEMPORARILY ABANDON | [ ] | CHANGE PLANS | [ ] | COMMENCE DRILLING OPNS. | [ ] | PLUG AND ABANDONMENT | [ ] |
| PULL OR ALTER CASING | [ ] | | | CASING TEST AND CEMENT JOB | [ ] | | |
| OTHER: | [ ] | | | OTHER: Installed pumping unit | | | [XX] |

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.

3-23-96 RIH w/15' GA 2-1/2 x 1-3/4 x 25' 3-tube pump

3-24-96 24 hrs 134 MCF, 228 BOPD, 50 BWPD, CP 70, LP 53.

RECEIVED
MAR 26 1996
OIL CON. DIV.
DIST. 2

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

SIGNATURE Betty Gildon TITLE Regulatory Analyst DATE 3/25/96

TYPE OR PRINT NAME Betty Gildon TELEPHONE NO. 915/686-3714

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY T[illegible]W. GUM DISTRICT II SUPERVISOR TITLE DATE MAR 26 1996

CONDITIONS OF APPROVAL, IF ANY: