State of New Mexico

Submit 3 Copies Form C-103 Energy ...nerais and Natural Resources Department to Appropriate Revised 1-1-89 District Office OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 WELL API NO. P.O. Box 2088 30 025 33299 DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATELX DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. LG 3167-A SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: Jackson Unit (18451)WELL X WELL 2. Name of Operator & Well Na Enron Oil & Gas Company (7377)3. Address of Operator 9. Pool name or Wildcat Johnson Ranch P. O. Box 2267, Midland, Texas 79702 +1±(79330) (Morrow) Well Location : 660 Feet From The north В __ Line and ___ 2100 __ Feet From The __east 15 24S Section Township Range 33E **NMPM** Lea County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3615' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: 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 X OTHER: OTHER: 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. 8-15-96 - TD 15.534' in Morrow "C" 8-21-96 - Ran 515 joints 3-1/2" 12.95# L-80 set at 15,534' Cemented with 315 sx Prem, .7% Halad-344, .4% Halad 413, .3% 2090 SSA, .6% CFR-3 (Batch mix), 15.6 ppg, 1.39 cuft/sx, 80 bbls slurry, AND 310 sx Prem 50/50 poz, 2% gel, .3% Halad-344, .3% Halad-413, .3% Halad-322, .15% HR5,

5# gilsonite, 14.2 ppg, 1.26 cuft/sx, 69.5 bbls slurry. WOC- 8 hours. 30 minutes pressure tested to 600#, OK.

I hereby certify that the information above is true and complete to the best of my knowle	odge and belief.	
SIONATURE RETURNING	mme Regulatory Analyst	DATE <u>8/23/96</u> (915) 686-3714
TYPEOR PRINT NAME Betty Gildon		(913) 000-3714 TELEPHONE NO.
This space for State Used CRIGINAL SIGNER BY JERRY SEXTON		المار والمراقي الم
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	— mre ——————————————————————————————————	DATE