

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

DEC 22 '94

WELL API NO. 30 015 27778
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B 11556-5
7. Lease Name or Unit Agreement Name Big Eddy Unit
8. Well No. 132
9. Pool name or Wildcat Und Delaware <i>S. Holden Long</i> <i>Delaware</i>
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3367.4' 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator Enron Oil & Gas Company
3. Address of Operator P. O. Box 2267, Midland, Texas
4. Well Location Unit Letter J : 1980 Feet From The south Line and 1980 Feet From The east Line Section 16 Township 21S Range 29E NMPM Eddy County

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER: <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER: Additional perforations <input checked="" 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.

12-13-94 - Perforated 3186-3188 & 3194-3202 (.38" 20)

Treated with 250 gals 7-1/2% HCl & 40 1.3 SG ball sealers.

12-15-94 - 2-7/8" tubing at 3271'

To be commingled with existing perms 5675-5685.

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 12/20/94  
TYPE OR PRINT NAME Betty Gildon TELEPHONE NO. 915/686-3714

(This space for State Use)

SUPERVISOR, DISTRICT II,

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE JAN 3 1995

CONDITIONS OF APPROVAL, IF ANY: