

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

MAY 10 1993

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.)		WELL API NO. 30 015 26564
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Enron Oil & Gas Company		6. State Oil & Gas Lease No. L-5364
3. Address of Operator P. O. Box 2267, Midland, Texas 79702		7. Lease Name or Unit Agreement Name Malaga 36 State
4. Well Location Unit Letter J : 1980 Feet From The south Line and 1980 Feet From The east Line Section 36 Township 23S Range 28E NMPM Eddy County		8. Well No. 1
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 2973.6' GR		9. Pool name or Wildcat Culebra Bluff, S. (Atoka)

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

5-5-93 - Perforated Atoka A-5 zone w/2-1/8" Hollow carrier 60 deg phasing 4 SPF
11,866 to 11,876 (50 holes)

No Treatment.

5-6-93 - Flowed 24 hours 5082 MCFD, 4 BCPD, 0 BWPD; FTP 3600; CP 500.

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

TYPE OR PRINT NAME

Betty Gildon

DATE
915/686-3714

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT IV

APPROVED BY

TITLE

DATE

MAY 14 1993

CONDITIONS OF APPROVAL, IF ANY: