## Submit 3 Copies to Appropriate District Office



State of New Mexico						
Energy,	Minerals	and Natural	Resources	Departmen		

	Form C-103 Revised 1-1-89
VELL API NO.	
30 015 271	70
5. Indicate Type of Lease	

Distance of the				
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION		WELL API NO.	
DISTRICT II	P.O. Box 200 Santa Fe, New Mexico		30 015 27170	
P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease STATE Y FEE	
DISTRICT III 1000 Rio Brazos Kd., Aztec, NM 87410	1. 3		6. State Oil & Gas Lease No.	
			L-6442	
SUNDRY NOTI				
1	POSALS TO DRILL OR TO DEEPER IVOIR. USE "APPLICATION FOR PE 101) FOR SUCH PROPOSALS.)		7. Lease Name or Unit Agreement Name	
1. Type of Well: OIL GAS WELL X WELL	/ OTHER		Poker Lake 32 State	
2. Name of Operator			8. Well No.	
Enron Oil & Gas Company  3. Address of Operator	<i>y</i> ∨		9. Pool name or Wildcat	
P. O. Box 2267, Midland	d, Texas 79702		West Sand Dunes Delaware/Cherry	
4. Well Location	2	650	Canyon	
Unit Letter A: 560	Feet From The north	Line and660	Feet From The <u>east</u> Line	
Section 32		ange 31E	NMPM Eddy County	
	10. Elevation (Show whether	· ·		
Chapter		361' GR	William Paris	
NOTICE OF INT	Appropriate Box to Indicate		ESEQUENT REPORT OF: 2/22/93	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	GOPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING		CASING TEST AND C	EMENT JOB	
OTHER:		OTHER: Addition	nal Perforations to be	
12. Describe Proposed or Completed Opera	ions (Clearly state all pertinent details a	d give pertinent dates inclu	Commingled  ding estimated date of starting any proposed	
work) SEE RULE 1103.	(cm )	an gove personere acces, unce	ang esamuea ame oj saring any proposeu	
2-24-93 - Perforated 62	265'-6275' (.35" 6 S	PF). Acidized	with 1250 gals 7-1/2% SWIC acid.	
Tubing & Lok-	-Set packer set at 768	0'.		
3-6-93 - Flowing to sal	os on 32/6/1" chaka: 21	52 BUDD: 135 MCI	ED. 8 PUDD. TD 60#	
3-0-93 - Flowing to sai	162 OH 32/04 CHOKE, 2.	133 MCI	$D$ , $O$ DWPD, $P$ $OO\pi$ .	
I hereby certify that the information above is true	and complete to the best of my knowledge and	belief.		
SKONATURE BUTTE	WOW THE	Regulatory i	· · · · · · · · · · · · · · · · · · ·	
TYPEOR PRINT NAME Betty Gildo	nn		915/686-3714 TELEPHONE NO.	
anicih.	IAL, SIGNED BY			
	VILLIAMS		APR 1 4 1993	
	VISOR DISTRICT II	1E	DATE	
CONDITIONS OF AFTROVAL, IF ANY:	_ <del>-</del>	· · ·		