Submit 3 Copies to Appropriate District Office

State of New Mexico herals and Natural Resources Department Energy,

| Form | C-103 |
|-------|-----------------|
| Revie | d 1-1-8: |

| DISTRICT I | | |
|-------------------------|-----|------|
| P.O. Box 1980, Hobbs, N | M | 3824 |
| DISTRICT | | i |
| DISTRICTI | 772 | |

OIL CONSERVATION DIVISION
PO Box 2088 RECEIVED

| WELL A | NO. | |
|--------|-----|-------|
| 30 | 015 | 27208 |

| P.O. Box 200 | PQ TIME ARIA PRIS |
|----------------------|--------------------|
| Santa Fe, New Mexico | 87504-2088 1993 |

5. Indicate Type of Let

| DIZIKIC | | | | | |
|----------|--------|------|--------|----|-------|
| 1000 Rio | Brazos | kd., | Aziec, | NM | 87410 |

P.O. Drawer DD, Astocia, NM 88210

O. C. D.

STATE FEE [6. State Oil & Gas Lease No. F-5229

| | | | | WHILE STORY | 2 0223 | | ~~~ |
|-----------------------------|-------------------------------|---|------------------|-------------------------------|---------------------|--|--------|
| SUNI | DRY NOTICES | AND REPORTS ON | WEL | LS - L | | | |
| (DO NOT USE THIS FOR | M FOR PROPOS ENT RESERVOIF | SALS TO DRILL OR TO DE R. USE "APPLICATION R | EPEN (OR PER | OR PLUG BACK TO A IMIT" | 7. Lease Name or | Unit Agreement Name | |
| | (FORM C-101) | FOR SUCH PROPOSALS | L) | | 1 | | |
| 1. Type of Well: | aus | | | | James Ranci | h Unit | |
| OF | MET X | OTHER | | | ļ | | |
| 2. Name of Operator | | | | | 8. Well No. | 10 | |
| Enron Oil & Gas | Company | | | | | 18 | |
| 3. Address of Operator | | | | | 9. Pool same or | Wildcat | |
| P. O. Box 2267. | Midland, | Texas 79702 | | | <u> </u> | | |
| 4. Well Location | | | | | | | |
| Unit 3 other G | BHL: 1980 | Feet From The north | | Line and 198 | 80 Feet From | n The <u>east</u> | Line |
| H | Surface: | 1980' FNL & 11 | 00' F | EL | | | |
| Section 36 | | Township 22S | Ran | age 30E | NMPM Eddy | | County |
| | | 10. Elevation (Show) | whether l | OF, RKB, RT, GR, etc.) | | <i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i> | |
| | | BHL: 3318' | GL | Surface: 33 | 16.5' GL | <i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i> | |
| 11. | Check Apr | propriate Box to Indi | | | | r Data | |
| | | - | | | | REPORT OF: 12 | 10/02 |
| NOTIC | E OF INTEN | HION TO: | | 305 | SEGULIATI | ILI OITI OI . 12 | /9/92 |
| PERFORM REMEDIAL WO | RK 🗌 | PLUG AND ABANDON | | REMEDIAL WORK | | ALTERING CASING | |
| TEMPORARILY ABANDON | | CHANGE PLANS | | COMMENCE DRILLING | GOPNS. | PLUG AND ABANDON | MENT [|
| PULL OR ALTER CASING | | | İ | CASING TEST AND C | EMENT JOB | | |
| | | | | | | | Г |
| OTHER: | | | لـا. | OTHER: | | | |
| 12. Describe Proposed or Co | mpleted Operations | (Clearly state all pertinent d | etails, an | d give pertinent dates, incli | ding estimated date | of starting any proposed | |
| | | • • | | | | | |

work) SEE RULE 1103.

12-16-92 - Ran 88 joints 40# K-55 8rd LT&C 9-5/8" casing set at 3810'.

1490 sacks Prem Plus Lite & 10# salt (513 bbls); 1.93 cuft/sx, 12.9 ppg; tail in with 300 sacks Prem Plus + 2% CaCl2 (71 bbls); 1.32 cuft/sx; 14.8 ppg; circulated 450 sacks.

30 minutes pressure tested to 1500 psi, OK; WOC - 18 hours.

| I hereby certify that the information above is true and complete to the best of my know | riedge and belief. | |
|---|--------------------|---|
| SKONATURE BUTTY SILLOW TYPEOR PRINT NAME Betty Gildon | Regulatory Analyst | DATE 1/11/93 915/686-3714 TELEPHONE NO. |
| (This space for State Use) ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT IS | mus | JAN 2 9 1993 |