Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form	C	-10	ß
Revis	ad	1-	1-89

Revised	1-1-

District Office	;		VV
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO. 30 015 28063
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease STATE FEE
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	ı		6. State Oil & Gas Lease No.
I DO NOT USE THIS FORM FOR P	TICES AND REPORTS ON WELLS ROPOSALS TO DRILL OR TO DEEPEN OR PLI ERVOIR. USE "APPLICATION FOR PERMIT"	UG BACK TO A	7. Lease Name or Unit Agreement Name
(FORM	C-101) FOR SUCH PROPOSALS.)		
1. Type of Well: OIL WELL X WELL [OTHER		Willow Lake 15
2. Name of Operator Enron Oil & Gas	Company		8. Well No. 2
3. Address of Operator	Midland, Texas 79702		9. Pool name or Wildcat Wildcat Delaware
4. Well Location	980 Feet From The south	Line and 2310	Feet From The east Line
Unit Letter : : 15	245		NMPM Eddy County
Section 13	10. Elevation (Show whether DF, RK)	B. RT. GR. etc.)	NAME OF THE PARTY
//////////////////////////////////////	3006 k Appropriate Box to Indicate Nature		eport, or Other Data
	NTENTION TO:	SUB	SEQUENT REPORT OF: 10-6-94
PERFORM REMEDIAL WORK	PLUG AND ABANDON REM	EDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS COM	IMENCE DRILLING	OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	CAS	ING TEST AND CE	XX BOL TNAM:
OTHER:	ОТН	ER:	
12. Describe Proposed or Completed Opwork) SEE RULE 1103.	perations (Clearly state all pertinent details, and give p	persinens dates, includ	ling estimated date of starting any proposed
10-12-94 - Ran 1	21 jts 5-1/2" 15.50# J-55 LT8	AC casing se	et at 4912'.
Cemen	ted with 200 sx 50/50 poz 2% cuft/sx, 45.9 bbls slurry.	gel, 5% sal Cemp survey	lt, 3% CF-2; 14.4 ppg, shows TOC at 3700'.
WOC -	24 hours.	30 minute	es pressure tested to 2000 psi, O
I hereby certify that the information above is	true and complete to the best of my knowledge and belief.		10/07/01
SIONATURE SILVE	THE _	Regulatory A	915/686-3714
TYPE OR PRINT NAME Betty	J1140N		TELEPHONE NO.
(This space for State Use)			NOV 4 1994
SUPERVIS	SOR. DISTRICT II mle		DATE