

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRI
(Other instruction
reverse side)

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Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

LEASE DESIGNATION AND SERIAL NO.

NM 14468

IF INDIAN, ALLOTTEE OR TRIBE NAME

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—" for such proposals.)

1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR

Matador Operating Company

8. FARM OR LEASE NAME

Grynberg 11 Federal Com

3. ADDRESS OF OPERATOR

Suite 158, Pecan Creek, 8340 Meadow Road, Dallas, TX 75231

9. WELL NO.

1

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also source 17 below.)
AT SURFACE

10. FIELD AND POOL, OR WILDCAT

White City Penn

1650' FNL & 1650' FEL

11. SEC. T., R., M., OR B.L.K. AND
SURVEY OR AREA

Sec 11, T25S, R26E

14. PERMIT NO.

30 015 22085

15. ELEVATIONS (Show whether DE, RT, GR, etc.)

3397.2' GR

12. COUNTY OR PARISH 13. STATE

Eddy

NM

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

REEL OR ALTER CASING ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETION ☐

SHOOT OR ACIDIZE ☐

ABANDON* ☐

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) Change Operator Name ☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT* ☐

(Other) ☐

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any
proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perti-
nent to this work.) *

Change operator from Enron Oil & Gas Company
P. O. Box 2267
Midland, Texas 79702

Effective 5-1-92

RECEIVED
MAY 14 1992
1650' FNL & 1650' FEL

I hereby certify that the foregoing is true and correct

SIGNED

Betty Sildon

TITLE Regulatory Analyst

DATE 4/29/92

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See instructions on Reverse Side