

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 88241-1980

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-34604
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. L5114
7. Lease Name or Unit Agreement Name Triste Draw "2" State
8. Well No. 1
9. Pool name or Wildcat Johnson Ranch (Wolfcamp)

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.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
2. Name of Operator Enron Oil & Gas Company	
3. Address of Operator P.O. Box 2267 Midland, TX 79702	
4. Well Location Unit Letter K : 1650 Feet From The SOUTH Line and 1650 Feet From The WEST Line Section 2 Township 25S Range 33E NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3448' GL	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Add Perforations ☒

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.

06/13/99-Perforated Wolfcamp Interval 13332'-13338' (6',13 holes,0 degrees phased). Shut-in.

06/15/99-Acidized Wolfcamp Interval 13332'-13338' down 2-7/8" production casing with 9000 gals. acid.
Flow to sales.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Mike Francis TITLE Agent DATE 10/28/99

TYPE OR PRINT NAME Mike Francis TELEPHONE NO. 915/686-3600

(This space for State Use)

ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT I SUPERVISOR

NOV - 8 1999

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

CT