BURE	UNIT D STATES MEN. OF THE INTERI AU OF LAND MANAGEMENT	ON COURS COMMUSSION	Expires Augus 5. LEASS DESIGNATION NM 5323	a No. 1004-0135 st 31, 1985 H AND SERIAL NO.	
(Do not use this form for prop- Use "APPLIC	TICES AND REPORTS (paging to drill or to deepen or page) action for permit—" for such page HO:	ON WELLS action and Control of Section 19832			
OIL X CAB OTHER			7. UNIT AGREEMENT 3	IAMB	
2. NAME OF OPERATOR				8. FARM OR LEASE MAME	
Enron Oil & Gas Company 3. ADDRESS OF OFERATOR				Shinnery 1 Federal	
P. O. Box 2267, Midland, Texas 79702			1		
4. LOCATION OF WELL (Report location See also space 17 below.)		10. FIELD AND POOL, OR WILDCAT			
1750' FSL & 990' FEL			11. SBC., T., B., M., OR	Young, North Bone Spring 11. SEC., T., B., M., OR BLE. AND SURVEY OR AREA	
14. PRIMIT NO.	i If Strongerous (Ch		Sec. 1, T189		
30-025-30627	15. BLEVATIONS (Show whether DF,	RT, GR, etc.)	12. COUNTY OR PARIS	NM	
		(AL.: D		1 MP	
NOTICE OF INTE	ppropriate Box To Indicate N		or Other Data angunt angun or: 6-	21 00	
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING		
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING	 	
SHOOT OR ACIDIZE	ABANDON®	SHOOTING OR ACIDIZING	ABANDONM	1 -,,	
(Other	CHANGE PLANS	(Other) <u>Casing</u> t	mits of multiple completton	An Wall	
17. DESCRIBE PROPOSED OR COMPLETED OP proposed work. If well is direct nent to this work.) *	SEATIONS (Clearly state all pertinent ionally drilled, give subsurface locat	. 1.4.21	ompletion Report and Log f ates, including estimated de rtical depths for all marke		
	set at 657' set at 2965'				
7/4/89 Set 9311' of 5-1/2" 17#	K-55 LT&C.				
Cemented with 800 sx. Cl followed by 500 sx. Cl (H lite + 10% A-5+0. C + 0.1% R-3 mixed at	7% FP-8 mixed at 1 15.6 ppg. yield 1.	2.7 ppg, yield 2 17 cuft/sx.	.02 cuft/sx.	
30 min. pressure tested	i to 2000#-0K.				
WOC - 18 hours.			. .		
			#2 #13		
			2.	_ R	
			· · · · · · · · · · · · · · · · · · ·	RECEIVED	
				CD H	
				IVE	
\cap			20 20	-	
18. I hereby certify that the foregoing	111.	Pogulatour Analust	<u> </u>	<u>ක</u>	
Betty Griden		egulatory Analyst		7/89	
(This space for Federal or State of	ice tae)	ACCEPTED FOR RECOND			
APPROVED BY CONDITIONS OF APPROVAL, IF A	ANY:	DATE DATE			
. * *			001213111000		
•	*See Instructions	on Reverse Side CA	SJS ARLSBAD, NEW ME	EXICO	