

3. Lease Designation and Serial No.
NM 28881

4. Well Name and No.

5. If Unit or CA, Agreement Designation

6. Well Name and No. #1
Vaca Ridge 30 Federal Com.

7. API Well No.
30 025 28873

8. Field and Pool, or Exploratory Area
Pitchfork Ranch Delaware/
Morrow

9. County or Parish, State
Lea County, NM

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
☐ Oil Well ☐ Gas Well ☒ Other SWD-549

2. Name of Operator
Enron Oil & Gas Company

3. Address and Telephone No.
P. O. Box 2267, Midland, Texas 79702 (915) 686-3714

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1980' FSL & 1980' FWL
Sec 30, T24S, R34E

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

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

13. 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 pertinent to this work.)

10-19-95 - Perforated 5424-5456, 5482-5518, 5534-5552, 5586-5662.

Acidized with 6000 gals of 15% Ferchek S.C. acid.

10-21-95 - Ran 2-7/8" 6.5# J-55 8rd tubing and packer set @ 5345.

10-21-95 - Resumed injection at 15:30.

10-22-95 - Injection volume after 40 hrs at 1568 bbls with injection pressure of 540 psig. (approx 940 bbls/day).

HOBBS INSPECTION OFFICE
ACCEPTED FOR RECORD

DATE 10-31-95

SIGNATURE URB

14. I hereby certify that the foregoing is true and correct:

Signature Betty Gildon Title Regulatory Analyst

Date 10/23/95

(This space for Federal or State office use)

Approved by
Conditions of approval, if any:

Title

Date