Submit 3 Copies to Appropriate District Office

1. Type of Weil:

3. Address of Operator

PERFORM REMEDIAL WORK TEMPORARILY ABANDON **PULL OR ALTER CASING**

4. Well Location

11.

OTHER:

WELL. 2. Name of Operator

Submit 3 Copies to Appropriate District Office	State of New Me Energ inerals and Natural Re	-	Form C-103 Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210	OIL CONSERVATIO P.O. Box 208 Santa Fe, New Mexico	38	WELL API NO. 30 025 29082 5. Indicate Type of Lease
DISTRICT III 1000 Rio Brazos Kd., Aztec, NM 87410			STATE X FEE 6. State Oil & Gas Lease No. LG-4235
(DO NOT USE THIS FORM FOR PRO DIFFERENT RESER (FORM C	ICES AND REPORTS ON WEL OPOSALS TO DRILL OR TO DEEPEN RVOIR. USE "APPLICATION FOR PEI C-101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
. Type of Well: OIL GAS WELL WELL X	OTHER		Diamond SM-36 State
L Name of Operator Enron Oil & Gas Compa	ny	1,1,2,1,2,1,2,1,2,1,2,1,2,1,2,1,2,1,2,1	8. Well No.
. Address of Operator P. O. Box 2267, Midla	nd, Texas 79702		9. Pool name or Wildcat Pitchfork Ranch Morrow
Unit Letter I : 198	Feet From The South Township 24S Ra 10. Elevation (Show whether 3479.2' GR	Line and 660 nge 33E DF, RKB, RT, GR, etc.)	Feet From The east Line NMPM Lea County
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: 2/14/91			
ERFORM REMEDIAL WORK	PLUG AND ABANDON CHANGE PLANS	REMEDIAL WORK	ALTERING CASING OPNS. PLUG AND ABANDONMENT
JLL OR ALTER CASING		CASING TEST AND CEMENT JOB	
THER:		OTHER: Additional Morrow perforations XX	
2. 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. 8/2/91 - Perforated Morrow "A" 14,674'-14,684' (20 .36" holes) and 14,686'-14,698' (26 .36" holes).			

12/20/91 - Acidized with 34,270 gallons 60 qulity CO2 Alco foam and 22,000# 20/40 Interprop plus.

01-07-92 - 7492 MCFD, 72 BCPD and 6 BWPD on a 17/64" choke with 3400 psi FTP.

2-7/8" 7.90# & 6.50# L-80 tubing set at 14,411'

I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIONATURE REGulato	ry Analyst PATE 1/7/92			
TYPE OR PRINT NAME Betty Gildon	915/686-3714 TELEPHONE NO.			

TITLE .

(This space for State Use) RIGINAL SIGNED BY JUNEY SENT THE DISTRICT I SUPERVISOR

JAN 09'92

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY -