

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate

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

LEASE DESIGNATION AND SERIAL NO.

NM 21511

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Enron Oil & Gas Company	8. FARM OR LEASE NAME Madera 33 Federal Com.
3. ADDRESS OF OPERATOR P. O. Box 2267, Midland, Texas 79702	9. WELL NO. 4
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2308' FSL & 1980' FEL of Sec. 33.	10. FIELD AND POOL, OR WILDCAT Pitchfork Ranch Atoka
14. PERMIT NO. CER-194	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3395.8' GR
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 33, T24S, R34E	12. COUNTY OR PARISH Lea
	13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF: 7/30/87	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Casing test & cement job.	

(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 pertinent to this work.)*

8-14-87 - Set 13,300' of 5-1/2" 17# P110.

Cemented with 950 sx DLW + 6% Gel +.3% D112 _ .1% D13 mixed at 12.1 #/gal yield 2.10. Followed with 450 sx. C1 H, .30 gal D108 + .4% D65 + .15% D13 mixed at 15.6 #/gal yield 1.19.

WOC -20-1/2 hours. 30 minutes pressure tested to 2500 psi.

ACCEPTED FOR RECORD

AUG 24 1987

STIS

CARLSBAD, NEW MEXICO

RECEIVED
AUG 20 12 50 PM '87
CARLSBAD, NEW MEXICO

18. I hereby certify that the foregoing is true and correct

SIGNED Betty Seldon TITLE Regulatory Analyst DATE 8/19/87

Betty Seldon

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side