

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒

DEEPEN ☐

PLUG BACK ☐

b. TYPE OF WELL

OIL  
WELL ☐

GAS  
WELL ☒

OTHER

SINGLE  
ZONE ☒

MULTIPLE  
ZONE ☐

2. NAME OF OPERATOR

Enron Oil & Gas Company

3. ADDRESS OF OPERATOR

P. O. Box 2267, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)\*  
At surface

1980' FNL & 2310' FEL

At proposed prod. zone

Same

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE\*

26 miles west of Jal, NM

15. DISTANCE FROM PROPOSED\*

LOCATION TO NEAREST  
PROPERTY OR LEASE LINE, FT.  
(Also to nearest drlg. unit line, if any)

1980'

16. NO. OF ACRES IN LEASE

640

17. NO. OF ACRES ASSIGNED  
TO THIS WELL

640

18. DISTANCE FROM PROPOSED LOCATION\*  
TO NEAREST WELL, DRILLING, COMPLETED,  
OR APPLIED FOR, ON THIS LEASE, FT.

None

19. PROPOSED DEPTH

16,500'

20. ROTARY OR CABLE TOOLS

Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

3369.2' GR

22. APPROX. DATE WORK WILL START\*

11/1/87

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
17-1/2"	13-3/8"	48#	650'	Circulate to surface
12-1/4"	9-5/8"	36#	5200'	Circulate to surface
8-1/2"	7"	26#	13500'	Cement to 7000'+
6-1/8"	4-1/2" Liner	15.10#	16500'	TOL: At 13200' - cement to TOL

BOP - Install at 5200' w/3000# cap. and 2450# annular preventor. At 13,500' increase to 10,000# cap. w/5000# annular preventor. Will use standard surface-controlled BOP installation.

Gas is dedicated.

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CASA DE LA FAMILIA

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED

Betty Gildon

TITLE Regulatory Analyst

DATE 9/11/87

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

DATE

9-23-87

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions On Reverse Side

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SEP 24 1987  
OCD  
HOBBS OFFICE