

N OIL CONS. COMMISSION
P.O. BOX 1980
HOBBS, NEW MEXICO 88240

Form 3160-5
 (June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
 Budget Bureau No. 1004-0135
 Expires: March 31, 1993

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 <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other | 5. Lease Designation and Serial No. NM 77064 |
| 2. Name of Operator Enron Oil & Gas Company | 6. If Indian, Allottee or Tribe Name |
| 3. Address and Telephone No. P. O. Box 2267, Midland, Texas 79702 | 7. If Unit or CA, Agreement Designation |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FNL & 1980' FEL Sec 6, T24S, R32E | 8. Well Name and No. Mesa Verde 6 Federal #5 |
| | 9. API Well No. 30 025 32504 |
| | 10. Field and Pool, or Exploratory Area Und. Bone Spring/Delaware |
| | 11. Country or Parish, State Lea County, NM |

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

| TYPE OF SUBMISSION | TYPE OF ACTION |
|---|--|
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Plugging Back |
| | <input type="checkbox"/> Casing Repair |
| | <input type="checkbox"/> Altering Casing |
| | <input checked="" type="checkbox"/> Other <u>Casing test & cmt job</u> |
| | <input type="checkbox"/> Change of Plans |
| | <input type="checkbox"/> New Construction |
| | <input type="checkbox"/> Non-Routine Fracturing |
| | <input type="checkbox"/> Water Shut-Off |
| | <input type="checkbox"/> Conversion to Injection |
| | <input type="checkbox"/> Dispose Water |

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

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.)*

5-11-94 - Ran 23 joints 8-5/8" 32# S-80 ST&C & 93 joints 8-5/8" 32# K-55 ST&C set at 4448'.

Cemented with 1150 sx Pacesetter Lite "C" (65/35/6) + 10% salt + 1/2#/sx Cello-cel 12.7 ppg, 2.04 cuft/sx (417 bbls slurry) and 200 sx Class "C" + 2% CaCl 14.8 ppg, 1.33 cuft/sx (47 bbls slurry). Circulated 178 sacks.

30 minutes pressure tested to 2000 psi. WOC - 12-1/2 hours.

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

Signed Betty Gildon Title Regulatory Analyst Date 5/12/94

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
 Conditions of approval, if any:

RECEIVED

JUL 10 1994

COMMUNICATIONS
OFFICE