Swingt 3 Copies to Appropriate
District Office

## State of New Mexico -Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT

## OIL CONSERVATION DIVISION TO

itel A	PI NO.			
30	025	33815		
			 	 _

P.O. Box 1980, Hoods, NM 88240	P.O. Box 2038		30 025 33815			
DISTRICT II P.O. Drawer DD, Arlesia, NM 88210	Santa Fe, New Mexico 3	Santa Fe, New Mexico 87504-2088		STATE	FEE X	
DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410			6. State Oil & Gas Les LC-061374-A			
OLINDRY NOTICES	AND REPORTS ON WEL	IS				
( DO NOT USE THIS FORM FOR PROPOS	ALS TO DRILL OR TO DEEPEN R. USE "APPLICATION FOR PEF FOR SUCH PROPOSALS.)	OH PLUG BACK TO A	7. Lease Name or Uni	i Agreement Name		
1. Type of Well: OI GUS WELL WELL Y	OTHER		Bell Lake 7 U	nit (19275	)	
2 Name of Operator Enron Oil & Gas Compan	.y		& Well Na 1		-	
3. Address of Operator P. O. Box 2267, Midlar	nd, Texas 79702		9. Fool name or Wild Bell Lake Mor			
4. Well Location Unit Letter J 2276		Line and 1863	} Feet From Th	east	Line	
Unit Letter					County	
Section 7	Township 24S Ra		NMPM Lea			
	3604'	GR	<u> </u>			
	ropriate Box to Indicate 1	Nature of Notice, R	eport, or Other D	DODT OF	6 10 07	
NOTICE OF INTEN	ITION TO:	SJE	SEQUENT RE			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	. =	LTERING CASING		
TEMPORARILY ABANDON		LUG AND ABAND	ONMENT [			
PULL OR ALTER CASING		CASING TEST AND C	EMENT XOB X			
OTHER:		OTHER:				
12. Describe Proposed or Completed Operations	(Clearly state all pertinent details, a	nd give pertinent dates, incli	uding estimated date of st	ianing any proposei	i	
work) SEE RULE 1103. 6-19-97 - Ran 45 joint	s 9-5/8" 40# HCK55	LT&C and 47 joi	ints 9-5/8" 36	o# K−55 LT&	C and	
	-5/8" 40# K-55 LT&C					
11.9 ppg, 2	th 1150 sacks P+, 50 .41 cuft/sx, 494 bbl .34 cuft/sx, 60 bbls	s slurry and 25	50 sacks P+, 2	2% CC,	,	
WOC - 11-3/4	hours	30 minutes p	pressure teste	ed to 1500	#, OK.	
<b>1</b>						
I hereby certify that the information above to true and	complete to the best of my knownedge so			6.10	2/07	
SHONATURE STUTE AU	Idan .	πε <u>Regulatory</u>	Analyst(	(915) 686-3	3/97 714	
TYPEORPRINT NAME Betty Gilde	on			TELEPHONE NO.		

(This space for State Use) (CTM (ARM AS A COLOR OF A CO APPROVED BY -

IUN 27 1997

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CONDITIONS OF APPROVAL, IF ANY: