

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

5. Lease Designation and Serial No.

NM 26079

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Ochoa Federal #1

9. API Well No.

30 025 27623

10. Field and Pool, or Exploratory Area

~~Midland~~
 Red Hills Bone Spring

11. County or Parish, State

Lea County, NM

SUBMIT IN TRIPLICATE

1. Type of Well

Oil Well Gas Well Other

2. Name of Operator

Enron Oil & Gas Company

3. Address and Telephone No

P. O. Box 2267, Midland, Texas 79702

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1980' FNL & 1980' FEL
 Sec 15, T25S, R33E

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 checked="" 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>Set tubing & Pumping Unit</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

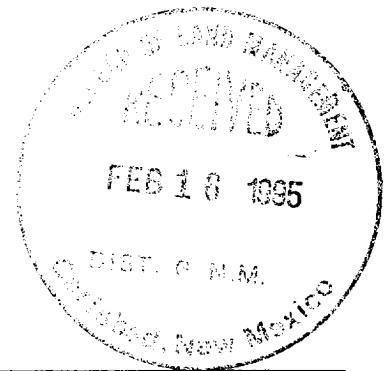
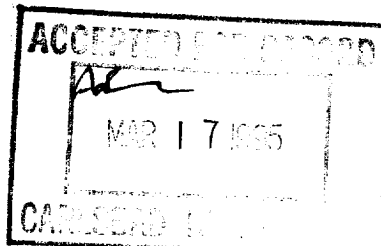
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

1-21-95 - 2-7/8" 6.5# N-80 tubing set at 12,036' (Perfs 12190-12266)

2-8-95 - Set 2-1/2" x 1-1/4" x 20' Pump.

2-13-95 - Pumping 24 hours, 55 BO, 0 MCF, 64 BW; FTP 120, CP 128.



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

Signature: Betty Gildon Title: Regulatory Analyst

Date: 2/15/95

(This space for Federal or State office use)

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

RECEIVED

21 1985

**INVESTIGATIONS
OFFICE**