7: rm 3160+5			M. M. OIL CONS. (OM ^{ar-2} SION	Form approved.	~	
November 1083) Formeriy 9=331;	UNI.) S DEPARTMENT OF	STATES THE INTER	P. GUBBOT 158TRI Other Instruction IO-ROBS MEW ME	PLI E	Budget Burcau No. Expires August 31	1985	
	BUREAU OF LAND	MANAGEMEN	T	AICO 88240	NM 14497	D SPRIAL P.	
SUI	NDRY NOTICES AND s form for proposals to drill or use "APPLICATION FOR PE	to deepen on plus	haab a 416	E .	IF INDIAN. ALLOTTEE OF	R TRIBE NAME	
WELL WELL	X OTHER			7. 1	UNIT AGREEMENT NAME		
NAME OF OPERATOR					8. FARM OR LEASE NAME		
Enron Oil & Gas Co-pany					Diamond 5 Federal		
P. O. Box 2267, Midland, Texas 79702					9. WELL NO.		
LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*					10. FIELD AND POOL, OR WILDCAT		
At surface					Pitchfork Ranch Morrow		
					SEC., T., E., M., OR BLE. SURVEY OR ARMA	AND	
660 FNL & 1980 FWL 15 ELEVATIONS (Show whether DF. RT. GR. etc.)					Sec 5, T25S, R34E		
30 025 2815		.8' GR	. RI, GR. ELE.)	12.		S. STATE	
16	Check Appropriate Bo	v To Indicate N	leture of Nieric D	. 01	Lea	NM	
	NOTICE OF INTENTION TO:	- 10 malegie i	idiore or 14ofice, Ker	SUBSEQUENT S		100	
TEST WATER SHUT-	TEST WATER SHUT-OFF PULL OR ALTER UNSING WATER SHUT-OFF				3/10	·	
FRACTURE TREAT	WULTIPLE COMPI	ETE	FRACTURE TREATM	LENT X	REPAIRING WELI ALTERING CASIN	 	
SHOOT OR ACIDIZE	ABANDON*	· · · · · · · · · · · · · · · · · · ·	SHOOTING OR ACIE	IZING	ABANDON MENT*		
REPAIR WELL - Others	CHANGE PLANE	;	(Other)	ort results of mu	litiple completion on	Well.	
Hene to this work.)	R COMPLETED OPERATIONS (Clearly well is directionally drilled, gr		t details, and give pertic aons and mensured and t	ent dates, includ rue vertical dept	me for all markers and	a sones perti-	
60	quality Alco Foam,	25,500# 20/4	40 Interprop.	ais Mod IU	1 & 4/,/5/ ga	IS	
6-21-93 - f	lowing 20,884 MCFD (on 34/64" cl	hoke; FTP 2150;	225 BCPD	& 9 BWPD.		
					200 J.	וָע	
		ONIG	G. SGD. DAVID JUN 2 9 1993	RD L GLASS	43) 67	n On N	
	\cap	CARL	SBAD, NEW MEXIC	:0	· · · · · · · · · · · · · · · · · · ·	Ö	
8. I hereny certify that	the foregoing is true and correc	t					
SIGNED Bett	XXII Oon	TITLE Reg	ulatory Analyst	<u> </u>	DATE 6/23/93		
This space for Feder	al or State office use)						
APPROVED BYCONDITIONS OF AP	PROVAL, IF ANY:	TITLE			DATE		

0 1 1993 0 1 1985