

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPTY
(Other instruction
reverse side)

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Form approved.
Budget Bureau No. 1004-10135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

5. LEASE DESIGNATION AND SERIAL NO.

NM 14497

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Diamond 5 Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Pitchfork Ranch Morrow

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec 5, T25S, R34E

12. COUNTY OR PARISH 13. STATE

Lea

NM

1. WELL TYPE
WELL ☐ GAS WELL ☒ OTHER

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.*
See also space 17 below.)

At surface

660' FNL & 1980' FWL Center (NENW) Section 5

Unit C

14. PERMIT NO.

38156

15. ELEVATIONS (Show whether OF, RT, GR, etc.)

3410.8' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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

17. 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.*

Fracture treat existing Morrow Perfs 15,051' to 15,131' with 42,823 gals 60 quality CO2
Alco foam and 24,600# 20/40 Interprop plus.

RECEIVED
FEB 19 43 AM '93
CARRIZO
AREA

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

SIGNED

Betty Sildon
Betty Sildon

TITLE

Regulatory Analyst

DATE

1/29/93

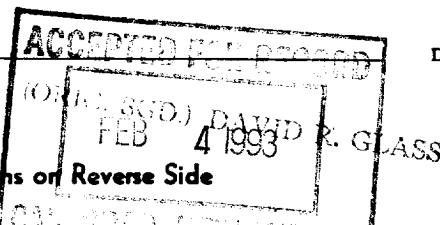
(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:



*See Instructions on Reverse Side

RECEIVED
FEB 04 1996
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