

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-30749
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

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" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	7. Lease Name or Unit Agreement Name Warren 3
2. Name of Operator Enron Oil & Gas Company	8. Well No. 2
3. Address of Operator P. O. Box 2267, Midland, Texas 79702	9. Pool name or Wildcat Pitchfork Ranch Morrow
4. Well Location Unit Letter <u>K</u> : <u>1980</u> Feet From The <u>south</u> Line and <u>1980</u> Feet From The <u>west</u> Line Section <u>3</u> Township <u>25S</u> Range <u>34E</u> NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <u>3357' GR</u>	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF: 3/8/90
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

3-28-90 - Set 13,290' of 7-5/8" 33.70# S-95 & P-110 and 29.70# S-95 and 39# P-110 LT&C.

Cemented with 760 sacks of Halliburton light cement + 6% Gel + .4 of 1% Halad 9 + 3#/sx salt + .1 of 1% HR-5, 2.14 cuft/sx, 12.4 ppg; followed with 450 sacks of Halliburton Premium cmt C1 "H" + .4 of 1% HR-5, 1.18 cuft/sx & 15.6 ppg.

WOC 23 hours. 15 min pressure tested to 2000 psi, OK.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Betty Gildon TITLE Regulatory Analyst DATE 4/18/90
TYPE OR PRINT NAME Betty Gildon (915) 686-3714
TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APR 20 1990

RECEIVED

APR 19 1940

OCD
HOBBS OFFICE