

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

LEASE DESIGNATION AND SERIAL NO.

NM 30400

IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Enron Oil & Gas Company	8. FARM OR LEASE NAME Hallwood 1 Federal Com.
3. ADDRESS OF OPERATOR P. O. Box 2267, Midland, Texas 79702	9. WELL NO. 1
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	10. FIELD AND POOL, OR WILDCAT Pitchfork Ranch Morrow
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 1, T25S, R33E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3464.7' GR	12. COUNTY OR PARISH: 13. STATE Lea NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PELL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.) *

ADDITIONAL INFORMATION FOR FORM 3160-3 (Application for Permit to Drill)

No coring or DST's anticipated.

BHT: 200 degrees at 7000 psi

Casing Detail: (All casing strings will be new casing)

16" 65# H-40 ST&C set at 650' & cemented w/800 sx Prem plus w/6% gel 2% CaCl, 1/4# Flocele

10-3/4" 40.5# & 45.5#, K-55 Butt & S-80 ST&C cemented with 2725 Prem plus Halliburton lite
16#/sx salt, 1/4#/sx flocele & Tail in with 250 sx prem plus
2% CaCl, 1/4#/sx flocele.

7-3/4 x 7-5/8"
46.1#, 39#, 33.7# & 29.7# P-110 MAC, S-105 FJP & S-95 LT&C set at 13,300' & cemented with
550 sx Prem Hallib lite + 6% gel, 4/10% Halad 9 & 3% salt. Tail in with
250 sx Prem containing 4/10% HR-5

4-1/2" 15.1# P-110 FL-4S production liner set at 15,450' (TOL: 13,000'), cemented with
300 sx premium containing 6/10% Gasstop, 5/10% CFR-3, 2/10% HR-5 &
3#/sx KCl.

I hereby certify that the foregoing is true and correct

SIGNED

Betty G. Seldon

TITLE Regulatory Analyst

DATE

7/10/92

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See instructions on Reverse Side