

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

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 32249
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input 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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Lease Name or Unit Agreement Name Diamond 7 State
2. Name of Operator Enron Oil & Gas Company	8. Well No. 1
3. Address of Operator P. O. Box 2267, Midland, Texas 79702	9. Pool name or Wildcat Red Hills (Bone Spring)
4. Well Location Unit Letter <u>F</u> : <u>1650</u> Feet From The <u>north</u> Line and <u>2310</u> Feet From The <u>west</u> Line Section <u>7</u> Township <u>25S</u> Range <u>34E</u> NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3395.4' GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
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.

1-16-94 - Spud 11:30 am

1-16-94 - Ran 15 joints 11-3/4" csg to 650' (42# H-40 ST&C)

Cement with 251 sacks C1 C + 4% gel, 2% CaCl<sub>2</sub>, 13.5 ppg, 1.74 cuft/sx and 100 sacks C1 C + 2% CaCl<sub>2</sub>, 14.8 ppg, 1.33 cuft/sx. Circulated 140 sacks.

WOC - 18-1/2 hours

30 minutes pressure tested to 1000#, 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

1/18/94

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

JAN 20 1994

CONDITIONS OF APPROVAL, IF ANY: