District I PO Box 1980, Hobbs, NM 88241-1980

State of New Mexico
Energy, Minerals & Natural Resources Dep

Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office

District II PO Drawer DD, Artesia, NM 88211-0719 District III

OIL CONSERVATION DIVISION PO Box 2088

5 Copies

000 Kie Brazes Pistrict IV O Box 2088, Sa	anta Fe, NM	A 87504-2088	8		·	M 87504						NDED REPOR		
•			ST FOR A			ND AU	THOR	IZATI	ON TO TR	ANSP				
Operator name and Address									017891					
Pogo Producing Company P. O. Box 10340 Midland, TX 79702-7340									RC effective 01/04					
30 - 0 15-	McMilla	* Pool Nam					' Pool Code 97104							
	-ZUIOU		MCMILIA	Property Na				+	* Well Number					
31922		1	State 19						·- <u>-</u>	1				
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UL or lot no.	Bottom I	Hole Lo	·	Lot Ida	T Free fr	Feet from the		outh line	Feet from the	East/Wes	et line	County		
UL OF IOL BU.	Section	1 Ow there,	P Anna-	LOC IVE	realion me		North/South line		Toba 1104			,		
" Lee Code " Producin S Flowin		ing Method		Connection Dat 29/04	10 10	C-129 Perm	it Number	16	C-129 Effective Date		" C-1	¹⁷ C-129 Expiration Date		
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Transport OGRID	rter		1º Transporter and Addre			и РОД п		" O/G		POD UL	STR Loc escriptio			
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36785			TX 772! ergy Serv		î		G	F/19/20/	-					
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And the second										FEB 2 R	2004			
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	M Hole Size			1/ 29/ 04 1 Casing & Tubing S		Size		Depth Set				Cement		
-														
· 117-11	T									. <u></u>				
VI. Well Date N			s Delivery Date	- × T	est Date		" Test Le	-noth	H Thg. Pr			³⁶ Cag. Pressure		
01/30/0	04	1	/30/04	02/01	02/01/04		24		500					
* Chok 22/64	ie Size	442	" Oil	98	Water		°G 616	•	4 AOF		Test Method Flowing			
" I hereby cert	the informatio	ules of the C m given abov	Dil Conservation ve is true and con	Division have been complete to the best	en complie t of my	44/		ORIGIN	NSERVAT VAL SIGNED KCT II SUPEI	BY TH	IVIS M W.	ION		
Printed name:	Cathy	y Wrigh	it			Title:								
Tide: Sr. Operati			on Tech	on Tech				Approval Date: FEB 2 9 2004						
Date:	02/25			1 402 000 0100										
" If this is a	change of or	perator fill in	n the OGRID no	number and name	e of the pr	revious oper	retor							
	Previous	Operator Si	ignature		·	Prin	ited Name		 	Tit	le	Date		