OCD-ARTESIA

Form 3160-5 April 2004)	_	UNITED STAT EPARTMENT OF TH UREAU OF LAND MA	IE INTERIOR	, ·		FORM APPROVED OM B No. 1004-0137 expires: March 31, 2007		
		SUNDRY NOTICES AND REPORTS ON WELLS				NM-12	845	
	Do not use th	Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160 - 3 (APD) for such proposals.				6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE- Other instructions on reverse side.					·7. If Unit or C	A/Agreement, Name an	ıd/or No.	
1. Type of Well Gas Well Other						e and No.	<u> </u>	
2. Name of Operator Pogo Producing Co.					SCI 9 API Well	5CL Federal #2		
3a. Address 3b. Phone No. (include area code)					30-1	30 - 015 - 24232 10. Field and Pool, or Exploratory Area		
PO BOX 10340, Midland 1479702 432 685-8229 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) PO BOX 1980 FNL \$ 1980 FEL					Red Tank, Atoka 11. County or Parish, State			
EW)						·	l A	
<u> </u>	,	PPROPRIATE BOX(ES)		URE OF NOTICE, IS		Y CO. N OTHER DATA	<u>,, , , , , , , , , , , , , , , , , , ,</u>	
TYPE OF	TYPE OF SUBMISSION TYPE OF ACTION							
Notice of	of Intent	Acidize Alter Casing	Deepen Fracture Treat	Production (Standard Reclamation	art/Resume)	Water Shut-Off Well Integrity	 	
Subsequ	uent Report	Casing Repair Change Plans	New Construction		. [Other		
Final A	bandonment Notice	Convert to Injection	Plug and Abando Plug Back	Temporarily Al Water Disposal				
If the pr Attach to following testing h	oposal is to deepen dire the Bond under which the geompletion of the invalue open completed. Find that the site is ready		ntally, give subsurface loc rovide the Bond No. on fi ion results in a multiple co be filed only after all req	ations and measured and trible with BLM/BIA. Requirempletion or recompletion uirements, including reclan	uc vertical depths ed subsequent reg in a new interval, nation, have been	of all pertinent markers ports shall be filed within a Form 3160-4 shall be completed, and the oper	and zones. n 30 days filed oncé	
	all ,	reclama	tion u	rock of	ias l	leen		
	comp	eleted.	\$ loca	ition.	us M	eady.		
		final a	abandi	mment				
			RECE	NED !				
1			JUN 1	2 2013		AD) ade	6/20/2013	
· ·			NMOCD	ARTESIA		NMOCE)	
14. I hereb	y certify that the fore	egoing is true and correct						
Name	(Printed/Typed) LISA	Hunt	Title	Regul	atory	anal	est	
Signatur	· Lua	Hunt	Dat	2/3	29/08		<i>U</i>	
	A	THIS SPACE FO	R FEDERAL OF	R STATE OFFICE	บร์E			

Approved by

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would offittle the applicant to conduct operations thereon.

Intel 8 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.