

Submit 1 Copy To Appropriate

State of New Mexico

Form C-103

District Office

Energy, Minerals and Natural Resources

Revised July 18, 2013

District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

DISTRICT II-ARTESIA O.C.D.

WELL API NO. 30-015-04562
5. Indicate Type of Lease STATE FED
6. State Oil & Gas Lease No. LCO28978B
7. Lease Name or Unit Agreement Name North Benson Queen Unit
8. Well Number #39
9. OGRID Number 372000
10. Pool name or Wildcat Benson, North Queen - Grayburg

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 Gas Well Other

2. Name of Operator Pogo Oil & Gas Operating Inc.

3. Address of Operator 1515 Calle Sur, Ste 174 Hobbs, NM 88240

4. Well Location Unit Letter F : 1650' feet from the North line and 1980' feet from the West line Section 34 Township 18S Range 30E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3434 RKB

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK PLUG AND ABANDON
TEMPORARILY ABANDON CHANGE PLANS
PULL OR ALTER CASING MULTIPLE COMPL
DOWNHOLE COMMINGLE
CLOSED-LOOP SYSTEM
OTHER:

SUBSEQUENT REPORT OF:

- REMEDIAL WORK ALTERING CASING
COMMENCE DRILLING OPNS. P AND A
CASING/CEMENT JOB
OTHER: MIT

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Performed MIT at 340Psi, for 5 year pressure test. Well passed test. Attached is the scan of the MIT chart.

Spud Date:

Rig Release Date:

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

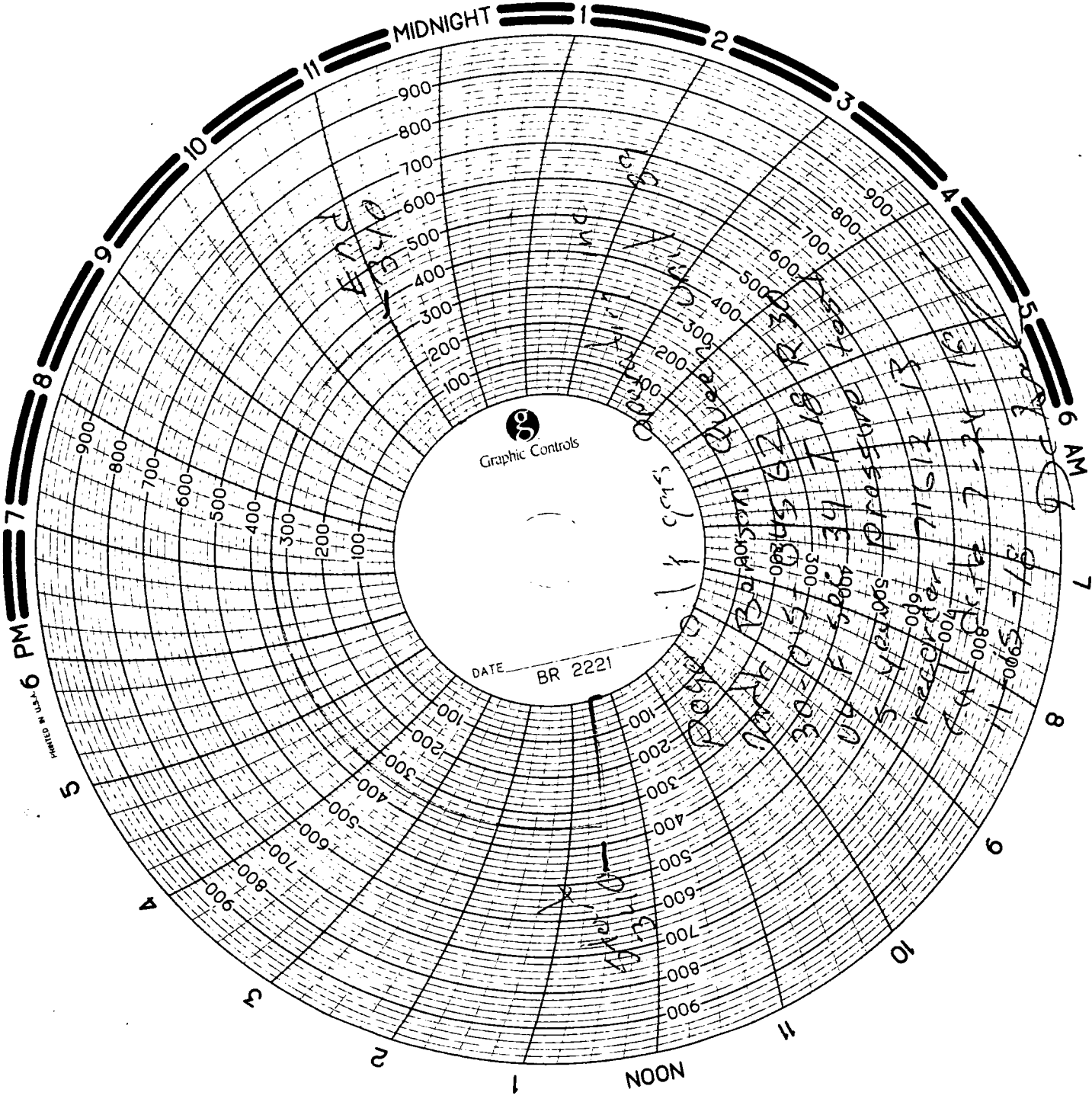
SIGNATURE [Signature] TITLE Production Manager DATE 11/16/18

Type or print name M. Merchant E-mail address: mymerch@peruocoll.com PHONE: (575) 492-1236

For State Use Only

APPROVED BY: [Signature] TITLE Compliance Officer DATE 11-27-18

Conditions of Approval (if any):



MADE IN U.S.A.