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Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe New Merica, 87504 2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 874		oanta re, New !	viexico 8/50	4-2088			45,	25	
I.	REQUEST	FOR ALLOWA	BLE AND	NUTHOR	IZATION				
Operator		ANSPORT O	IL AND NA	URALG		API No.			
Pogo Producing C	ompany					015-26917			
P.O. Box 10340,	Midland TY 70°	702_7340							
Reason(s) for Filing (Check proper be	m)	702-7340	Othe	t (Please expl	lain)	 			
New Well	Change i	in Transporter of:		· (/ icase exp		COME	10171	: <u>i</u>	
Recompletion	oil E	Dry Gas			<u> </u>	COMFIL			
Change in Operator	Casinghead Gas	Condensate [, L	
If change of operator give name and address of previous operator							· · · · · · · · · · · · · · · · · · ·		
II. DESCRIPTION OF WEI	L AND LEASE								
Lease Name Federal "12"	Well No.	Pool Name, Includ	ding Formation	D - 7 -	Kind	of Lease		ise No.	
Location		Livings	ston Ridge	, Delaw	are Sue.	Federal or Fee	NM-29	233	
Unit LetterK	: 2310'	_ Feet From The SC	outhLine	and165	<u>0'</u> Fe	et From The	West	Line	
Section 12 Town	ship 225	Range 31F	, NM	PM,	Eddy			County	
III. DESIGNATION OF TRA	INSPODTED OF O	TE ABID MATER	IDAL GAG					County	
III. DESIGNATION OF TRA Name of Authorized Transporter of Oil	XXX Editor	tiengy Corp.	Address (Give of	address to wh	ich approved	copy of this form	s is to be sen	·)	
Enron Oil Trading & Transportactive 1-1-93			P.O. Box 1188, Houston, TX 77252					,	
Name of Authorized Transporter of Casinghead Gas XX or Dry Gas Texaco, IncHobbs			Address (Give address to which approved copy of this form is to be sent))	
If well produces oil or liquids,	<u> </u>		P.O. Box 730 Hobbs N Is gas actually connected? When						
ive location of tanks.	M		Vos			4-15-92			
this production is commingled with the V. COMPLETION DATA	at from any other lease or	pool, give comming	ling order number			<u> </u>			
	Oil Well	Gas Well	Now Well 1	Workover	Danna	Divo Doob Is			
Designate Type of Completion		1	i ^{XX} i	A CHECKOASI	Deepen	Plug Back Sa	me Kes'v	Diff Res'v	
Date Spudded 3-2-92	Date Compl. Ready to Prod. 4-1-92		Total Depth 8525	-		P.B.T.D. 848	<u> </u>		
levations (DF, RKB, RT, GR, etc.)	Name of Producing Fo	Top Oil/Gas Pay			Tubing Depth				
3590.9 GR Delaware		7052			6990'				
7052-70961						Depth Casing Si			
7032-7096	TUBING.	CASING AND	CEMENTING	PECOPE	<u> </u>	852	5'		
HOLE SIZE	CASING & TU	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"	1	818'		1000 sks-circ 200 sks				
11"	8 5/8"		4310'		1700 sks-circ 250 sks				
7 7/8"	5 1/2"		8525'		1375 sks-TOC 2200' FS				
. TEST DATA AND REQUE	2 7/8" EST FOR ALL OWA	Dir	6990'						
IL WELL (Test must be after			he equal to oe exc	eed ton allow	nhla (no shia	domb on he for 6			
ate First New Oil Rus To Tank 4-2-92	Date of lest			be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)					
ength of Test	4-16-92		Pumping						
24 hrs		Tubing Pressure N/A		Casing Pressure			Choke Size		
ctual Prod. During Test	Oil - Bbls.		40 Psig			None Gas- MCF			
	138		5	7		127			
GAS WELL ctual Prod. Test - MCF/D									
	Length of Test		Bbls. Condensate	MMCF		Gravity of Conde	neale		
sting Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Size				
I. OPERATOR CERTIFIC	ATE OF COMP	IANCE			1				
I hereby certify that the rules and regu	lations of the Oil Consense	أأ	OIL	CONS	SERVA	TION DIV	/ISION		
Division have been complied with and		110							
is true and complete to the best of my propyledge and belief.			Date Approved APR 2 9 1992						
Like the del	Dale At	hinsea		69 69 50	-316				
Signature Kichand I Unight	By ORIGINAL SIGNED BY								
Signature Kichard L. Wright, Div. Oper. Supt.			MIKE WILLIAMS						
4-21-92 915-682-6922			Title SUPERVISOR, DISTRICT IT						
Date		one No.	3. f	ů.					

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.