Submit 5 Copies
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 Mexico 87504-2088

MAR 1 1 197?

DISTRICT III

I.	REC						O AUTHO	GAS	1 24 14 CH	CAPPRICE		
Operator Pogo Producing Company /								We	30-015-26918			
Address P.O. Box 103			Tevas	- 7	970°	2 - 7340		<u> </u>				
Reason(s) for Filing (Check proper box			TEXUS				Aher (Please ex	tplain)				
New Well						COMFIDENTIAL					Manager Transport	
If change of operator give name and address of previous operator												
II. DESCRIPTION OF WELL	L AND LI	EASE									<u> </u>	
Lease Name Federal 12		Well No. Pool Name, Inche 7 Livingsto							i of Lease e, Federal or F	of Lease Lease No. Federal or Fee NM-29233		
Location Unit LetterF	:1	1650	_ Feet Fi	rom Ti	ne No	orth L	ine and1	650	Feet From The	West	Line	
CIT Energy Operating LD	hip 22 S							ddy			County	
III. DESIGNATION OF TRA Name of Authorized Transporter of Oil	NSPORTI	ER OF O	IL AN	D NA	ATU	RAL GAS	<u> </u>					
Enron Oil Trading	nd continuity roll				rp.	P.O.	iwe address to t Box 1188	w <i>hich approve</i> • Housto	copy of this form is to be sent) 1, Texas 77252			
Name of Authorized Transporter of Casi Texaco, Inc.	nc.				3	Address (G	ive address to t	which approve	A copy of this form is to be sent) New Mexico 88240			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	-		ls gas actua	lly connected?		n ?			
If this production is commingled with the		her lease or	22S 1001. piv		l E mineli		Yes		March	4, 1992		
IV. COMPLETION DATA					·······	ing older nu						
Designate Type of Completion		Oil Well	i	Gas We	:11	New Well	i	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded 02-07-92		pl. Ready to				Total Depth	8535'		P.B.T.D.	8497'		
Elevations (DF, RKB, RT, GR, etc.) 3584.9 GR						Top Oil/Gas Pay 7055			Tubing Depth 7008'			
7055'-7108' 106 holes 2 spf					1				Depth Casing Shoe 8535 '			
	7	TUBING,	CASIN	NG A	ND (CEMENT	ING RECO	RD				
HOLE SIZE 17-1/2"	CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT			
11"	 	8-5/8				810' 4295'				1025 sx 1575 sx		
7-7/8"	 	5-1/2'				8535'				1510 sx		
	2-7/8" tbg.				7008'			1310 3	^			
V. TEST DATA AND REQUE OIL WELL (Test must be after t				il and i	must l	be equal to o	r exceed top all	lowable for the	is depth or be	for full 24 hour	· · ·	
Date First New Oil Run To Tank 02-28-92	Date of Test 03-03-92					be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.) Flowing						
Length of Test 24 hours	Tubing Pre	Tubing Pressure				Casing Press	ure		Choke Size			
Actual Prod. During Test	Oil - Bbls.				455 Water - Bbls.				/64			
The state of the s	Oil - Bois.	269				102			Gas- MCF	200		
GAS WELL									<u></u>			
Actual Prod. Test - MCF/D	Length of Test					Bbls. Condensate/MMCF			Gravity of C	Gravity of Condensate		
esting Method (pilot, back pr.)	Tubing Pre	Tubing Pressure (Shut-in)			7	Casing Pressure (Shut-in)			Choke Size			
I. OPERATOR CERTIFIC				CE				ICEDY	ATION!		J	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.						OIL CONSERVATION DIVISION						
Share and belief.						Date	Approve	d	TAK Z	6 1992		
Signature Richard L. Wright	~////	ENP iv	QN _C)114 -	-	By	DE 3-08	IGINAL SI	GNED BY			
Printed Name March 9, 1992			r. St	ape.	-	Title		KE WILLIA	MS L DISTRIC	T 10		
Date 1982		915)682 Telepi	-6822 home No.		-				2			

- 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 with Rule 111.
- 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.