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

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

RECEIVED C-104
Revised 1-1-89
See Instructions
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OCT - 6 1992

O. C. D.
ARTESIA REGION

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Pogo Producing Company		Well API No. 30-015-27115
Address P.O. Box 10340, Midland, Texas 79702-7340		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator		

CONFIDENTIAL

II. DESCRIPTION OF WELL AND LEASE

Lease Name Mobil Federal	Well No. 7	Pool Name, Including Formation Sand Dunes West, Delaware	Kind of Lease State, Federal or Fee	Lease No. NM -281482-A
Location Unit Letter P : 330 Feet From The South Line and 660 Feet From The East Line Section 29 Township 23 South Range 31 East , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Enron Oil Trading & Trans.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1188, Houston, Texas 77252	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 29
	Twp. 23S	Rge. 31E
	Is gas actually connected? Yes	When? October 1, 1992

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 08-03-92	Date Compl. Ready to Prod. 09-24-92		Total Depth 8110'		P.B.T.D. 8063'			
Elevations (DF, RKB, RT, GR, etc.) 3356.6'	Name of Producing Formation Delaware		Top Oil/Gas Pay 7838'		Tubing Depth 7788'			
Perforations 7838-7934' 2 spf, 192 holes					Depth Casing Shoe 8110'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		553'		543 sx-circ 152 sx			
11"	8-5/8"		4050'		1200 sx-circ 220 sx			
7-7/8"	5-1/2"		8110'		1255 sx-TOC 3200 CBL			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank 09-25-92	Date of Test 09-28-92	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 950	Casing Pressure 1200	Choke Size 18/64"
Actual Prod. During Test	Oil - Bbls. 454	Water - Bbls. 83	Gas- MCF 540

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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.

Signature Richard L. Wright
Printed Name Richard L. Wright Div. Oper. Mgr.
Date October 5, 1992 Telephone No. (915) 682-6822

OIL CONSERVATION DIVISION

Date Approved OCT 9 1992

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

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.