

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N.M. Oil Cons. Division
811 S. 1st Street
Alamosa, NM 88210-2834

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Pogo Producing Company

3. Address and Telephone No.

P. O. Box 10340, Midland, TX 79702-7340 (915)682-6822

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1800' FNL & 2310' FWL, Section 21, T24S. R29E

5. Lease Designation and Serial No.

NM-86550

6. If Indian, Allottee or Tribe Name

7. Unit or C.A. Agreement Designation

8. Well Name and No.

Yvonne 21 Federal #1

9. XPP Well No.

30-015-28850

10. Field and Pool, or Exploratory Area

Corral Draw Delaware

11. County or Parish, State

Eddy County, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Add Delaware Perfs

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

12/13/96 Set CIBP @ 6450'. Perf Delaware 6206'-66' (60 - .38" dia holes).
12/14/96 Acdz w/ 1500 gals 7-1/2% HCL. Swab load back.
12/15/96 Swab test well.
12/18/96 Frac w/ 62,800# 16/30 sand. Flow well back.
12/19/96 Circ well clean. Swab test.
12/21/96 Run production eqpt & put well on production.

ACCEPTED FOR RECORD

FEB 11 1997

14. I hereby certify that the foregoing is true and correct

Signed Bonnie Smith Title Senior Operations Engineer

Date 2/7/97

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____ Date _____