

N. M. OIL CONS. COMMISSION
UNITED STATES P. O. BOX 1980
DEPARTMENT OF THE INTERIOR HOBBS, NEW MEXICO 88240
BUREAU OF LAND MANAGEMENT

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

<p>1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other</p> <p>2. Name of Operator <u>Pogo Producing Company</u></p> <p>3. Address and Telephone No. <u>P. O. Box 10340, Midland, TX 79702-7340 (915)682-6822</u></p> <p>4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <u>2310' FSL & 760' FEL, Section 25, T21S, R32E</u></p>	<p>5. Lease Designation and Serial No. <u>NM-86145</u></p> <p>6. If Indian, Allottee or Tribe Name</p> <p>7. If Unit or CA, Agreement Designation</p> <p>8. Well Name and No. <u>AXE 25 Federal #1</u></p> <p>9. API Well No. <u>30-025-33318</u></p> <p>10. Field and Pool, or Exploratory Area <u>Wildcat</u></p> <p>11. County or Parish, State <u>Lea County, NM</u></p>
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12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Intermediate Casing</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> 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.)*

Drilled 9-7/8" hole 758' to 4970'. TD reached @ 1745 hrs CST 3/11/96. Ran 114 jts 7-5/8" 26.40# J-55 LT&C csg. Float shoe @ 4970'. Float collar @ 4925'. Csg pkr @ 3248'. DV tool @ 3240'. Howco cmt'd 1st stage w/ 125 sxs Halliburton Lite @ 12.4 ppg followed by 150 sxs Cl "C" @ 14.8 ppg. Drop plug & disp cmt. Drop bomb, set pkr & open DV tool. Cmt 2nd stage w/ 950 sxs Halliburton Lite @ 12.4 ppg followed by 50 sxs Cl "C" @ 14.8 ppg. Plug down @ 1030 hrs CST 3/12/96. Recov 260 sxs excess cmt. ND BOP's & make shut-off. Install wellhead & test to 1500 psi. NU BOP's & test to 1500 psi.

HOBBS INSPECTION OFFICE
ACCEPTED FOR RECORD

DATE 5-22-96
SIGNATURE [Signature]

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

Signed [Signature] Title Senior Operations Engineer

Date 5/21/96

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: