Submit 1 Copy To Appropriate District	State of New M	exico	Form C-103
Office <u>District 1</u> – (575) 393-6161	Energy, Minerals and Natural Resources		Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-025-40433
<u>District III</u> – (505) 334-6178	¹⁷⁸ 1220 South St. Francis Dr.		5. Indicate Type of Lease STATE STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460	Nanta Fel NM X / 101		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	UOB	BSOCD	
	CES AND REPORTS ON WELLS	5	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOS, DIFFERENT RESERVOIR. USE "APPLIC, PROPOSALS.)	ALS TO DRILL OR TO DEEPEN OR PL ATION FOR PERMIT" (FORM C-1047) F	OR SUCH	East Hobbs San Andres Unit
1. Type of Well: Oil Well 🛛 Gas	Well 🗌 Other 🔲 🗖 🗖	CEIVED	8. Well Number 312
2. Name of Operator Pogo Oil an	d Gas Operating		9. OGRID Number 372000
3. Address of Operator			10. Pool name or Wildcat
P.O. Box 3217 Hobbs, NM 88240	i		Hobbs; San Andres, East
4. Well Location			
Unit LetterL :2499feet from theSouth line and746feet from theWestline			
Section 29	Township 18S	Range 39E	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) . 3596			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
		REMEDIAL WOR	SEQUENT REPORT OF: K
PULL OR ALTER CASING		CASING/CEMEN	
OTHER:	П	OTHER:	X
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated			
date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.			
-RU PU. NU BOP & POOH w/ tbg. LD all tbg.			
-RU wireline and RIH. Perforated 4473'-4463' 2 SPF and 4,420'-4,412' 2SPF.			
-RIH w/ RBP, pkr, and 2 7/8" tbg. Set RBP @ 4500' and set pkr @ 4368', and acidize zone w/ 2000 gal of 15% gel acid 600# rock salt.			
-Release pkr and TIH to retrieve RBP. POOH with tbg string.			
-RTP			
Test: 5/24/2019 4bo, 210 bw			
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Spud Date:	Rig Release D	ate:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE HORACHANT TITLE Doles to a Clause DATE 578/13			
Type or print name MV Merchant E mail address, mymerch@nenroadil.com DUONE, 575 402 1026			
Type or print nameM.Y. Merchant E-mail address:mymerch@penrocoil.com PHONE: _575-492-1236 For State Use Only			
APPROVED BY SARAN Charp TITLE Staff Mgr DATE 5-28-19			
Conditions of Approval (if any):			

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