

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

FORM APPROVED
OMB NO. 1004-0137
Expires: March 31, 2007

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other										5. Lease Serial No. NM-81616	
b. Type of Completion: <input type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input checked="" type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr., Other _____										6. If Indian, Allottee or Tribe Name	
2. Name of Operator Pogo Producing Company										7. Unit or CA Agreement Name and No.	
3. Address P.O. Box 10340, Midland TX 79702						3a. Phone No. (include area code) 432-685-8100				8. Lease Name and Well No. River Bend 10 Federal #2	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface 2180' FNL & 1980' FWL At top prod. interval reported below same At total depth same										9. AFI Well No. 30-015-20756	
10. Field and Pool, or Exploratory Cedar Canyon Bone Spring										11. Sec., T., R., M., on Block and Survey or Area 10/24S/29E	
12. County or Parish Eddy County										13. State NM	
14. Date Spudded			15. Date T.D. Reached			16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 12/4/04			17. Elevations (DF, RKB, RT, GL)* 2982'		
18. Total Depth: MD TVD			19. Plug Back T.D.: MD TVD 8123'			20. Depth Bridge Plug Set: MD TVD					
21. Type Electric & Other Mechanical Logs Run (Submit copy of each)										22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit report) Directional Survey? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit copy)	
23. Casing and Liner Record (Report all strings set in well)											
Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled		
	13-3/8			657		750					
	9-5/8			7398		3645					
	4-1/2			8455		1160					
24. Tubing Record											
Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)			
25. Producing Intervals											
Formation			Top	Bottom	Perforated Interval			Size	No. Holes	Perf. Status	
A) Bone Spring			7834	7866					1 spf		
B)											
C)											
D)											
26. Perforation Record											
27. Acid, Fracture, Treatment, Cement Squeeze, etc.											
Depth Interval			Amount and Type of Material								
7834-66			Frac w/ 89,000# 16/30 TLC + 40,000# 16/30 SLC								
28. Production - Interval A											
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method		
12/4/04	12/5	24	→	158	392	156	41.8		Flowing		
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status			
24/64	SI 640	1250	→					Producing			
28a. Production - Interval B											
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method		
			→								
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status			
			→								

*(See instructions and spaces for additional data on page 2)

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28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	

28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	

29. Disposition of Gas (Sold, used for fuel, vented, etc.)

Sold

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top Meas. Depth

32. Additional remarks (include plugging procedure):

33. Indicate which items have been attached by placing a check in the appropriate boxes:

- ☐ Electrical/Mechanical Logs (1 full set req'd.) ☐ Geologic Report ☐ DST Report ☐ Directional Survey
☒ Sundry Notice for plugging and cement verification ☐ Core Analysis ☒ Other: C-104

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)*

Name (please print) Cathy Wright Title Sr Eng Tech
 Signature Cathy Wright Date 12/17/04

Title 18 U.S.C Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.