

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-015-31432
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name STATE W
8. Well Number 2
9. OGRID Number 246289
10. Pool name or Wildcat CARLSBAD; MORROW, SOUTH
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,311' GR

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator RKI EXPLORATION & PRODUCTION

3. Address of Operator 210 PARK AVE., SUITE 900, OKLAHOMA CITY, OK 731012

4. Well Location
 Unit Letter M : 660 feet from the SOUTH line and 660 feet from the WEST line
 Section 3 Township 23S Range 26E NMPM County EDDY

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

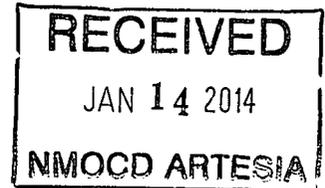
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

RKI Exploration and Production requests to temporarily abandon this well while it is being evaluated for possible future use.

Perfs at 10,412' - 10,522'
 CIBP at 10,220'
 PBTD at 10,220'
 TD at 12,000'

When TA status is approved, RKI will notify the OCD 24 hours in advance of mechanical integrity testing.



Perfs 11648-11678 3/01
 CIBP 11,450 1/05
 Perfs @ 10,506-10522/10412
 Perfs @ 10,308

Spud Date: 12/18/2000

Rig Release Date: 2/8/2001

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Jody Noerdlinger TITLE Regulatory Analyst DATE 1/10/2014
 Type or print name Jody Noerdlinger E-mail address: jnoerdlinger@rkixp.com PHONE: 405-996-5774

For State Use Only
 APPROVED BY [Signature] TITLE Dr. P. Spowis DATE 3/17/2014
 Conditions of Approval (if any):

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. Francis Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 May 27, 2004



OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-015-31432
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
 Pogo Producing Company SEP 13 2007

3. Address of Operator
 P. O. Box 10340, Midland, TX 79702-7340 OCD-ARTESIA

4. Well Location
 Unit Letter M : 660 feet from the South line and 660 feet from the West line
 Section 3 Township 23S Range 26E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
 3312

Pit or Below-grade Tank Application or Closure
 Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
 Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:
 PERFORM REMEDIAL WORK PLUG AND ABANDON
 TEMPORARILY ABANDON CHANGE PLANS
 PULL OR ALTER CASING MULTIPLE COMPL
 OTHER:

SUBSEQUENT REPORT OF:
 REMEDIAL WORK ALTERING CASING
 COMMENCE DRILLING OPNS. P AND A
 CASING/CEMENT JOB
 OTHER: Temporarily Abandon

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

07/11/07 CIBP set @ 10,220'.
 -07/12/07 Test csg to 550 psi for 30 mins. Well Temporarily Abandoned.
 Original chart was lost in the mail. Sec copy of chart attached.

File
 Copy

Temporarily Abandoned Status approved
 9/19/2009

Refer to ACOI-121

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE Cathy Wright TITLE Sr. Eng Tech DATE 09/12/07

Type or print name Cathy Wright E-mail address: wrightc@pogoproducing.com Telephone No. 432-685-8100

For State Use Only

APPROVED BY: Richard Inge TITLE Compliance Officer DATE 9/19/07
 Conditions of Approval (if any):

Submit 3 Copies To Appropriate District
 Office
 District I
 1625 N. French Dr., Hobbs, NM 88341
 District II
 1301 W. Grand Ave., Artesia, NM 88213
 District III
 1000 Rio Brazos Rd., Aztec, NM 87412
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 May 27, 2004



OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

RECEIVED
 MAY 27 2007
 NM OCS
 DISTRICT II
 ARTESIA

WELL API NO.
 30-015-31432

5. Indicate Type of Lease
 STATE FEE

6. State/Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
 Pogo Producing Company

3. Address of Operator
 P. O. Box 10340, Midland, TX 79702-7340

4. Well Location
 Unit Letter M : 660 feet from the South line and 660 feet from the West line
 Section 3 Township 23S Range 26E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
 3312

7. Lease Name or Unit Agreement Name
 State "W"

8. Well Number 2

9. OGRID Number
 017891

10. Pool name or Wildcat
 Undes Frontier Hills; Strawn

Pit or Below-grade Tank Application or Closure

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input checked="" type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>	
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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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Pogo Producing Company respectfully request TA status for the above captioned well. A CIBP will be set @ 10,250' and an integrity test run as soon as TA status is approved.

File
 Copy

Notify OCD 24 hrs. prior to **Test**
~~Any work done.~~

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE Cathy Wright TITLE Sr. Eng Tech DATE 05/16/07

Type or print name Cathy Wright E-mail address: wrightc@pogoproducing.com Telephone No. 432-685-8100

APPROVED BY: Gary Guye TITLE Deputy Field Inspector DATE JUN 1 2007
 District II - Artesia

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 March 4, 2004

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-015-31432
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name State "W"
8. Well Number 2
9. OGRID Number 017891
10. Pool name or Wildcat Undes Frontier Hills; Strawn

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:
 Oil Well Gas Well Other

2. Name of Operator
 Pogo Producing Company

3. Address of Operator
 P. O. Box 10340, Midland, TX 79702-7340

4. Well Location
 Unit Letter M : 660 feet from the South line and 660 feet from the West line
 Section 3 Township 23S Range 26E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
 3312

RECEIVED
 JAN 19 2006
 OGD-ARTESIA

Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached)

Pit Location: UL _____ Sect _____ Twp _____ Rng _____ Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____

Distance from nearest surface water _____ Below-grade Tank Location UL _____ Sect _____ Twp _____ Rng _____ ;
 feet from the _____ line and _____ feet from the _____ line

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input checked="" type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOB <input type="checkbox"/> File</p> <p>OTHER: <input type="checkbox"/> Copy</p>
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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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Pogo Producing Company request TA status for the above captioned well. A CIBP will be set @ ~~10,250~~ ^{11,548'} and an integrity test run as soon as TA status is approved. Notify OCD 24 hours prior to test. 748-1283

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE Cathy Wright TITLE Sr Eng Tech DATE 1/11/06
 Type or print name Cathy Wright E-mail address: wrightc@pogoproducing.com Telephone No. 432-685-8100

(This space for State use)

APPROVED BY [Signature] TITLE _____ DATE 1-19-06
 Conditions of approval, if any:

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 March 4, 2004

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-015-31432
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name State "W"
8. Well Number 2
9. OGRID Number 017891
10. Pool name or Wildcat Undes Frontier Hills; Strawn

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:
 Oil Well Gas Well Other

2. Name of Operator
 Pogo Producing Company

3. Address of Operator
 P. O. Box 10340, Midland, TX 79702-7340

4. Well Location
 Unit Letter M : 660 feet from the South line and 660 feet from the West line
 Section 3 Township 23S Range 26E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
 3312

Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached)

Pit Location: UL Sect Twp Rng Pit type Depth to Groundwater Distance from nearest fresh water well
 Distance from nearest surface water Below-grade Tank Location UL Sect Twp Rng ;
 feet from the line and feet from the line

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input checked="" type="checkbox"/>	Plugging back

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

11/06/04 Set CIBP @ 11,455'. Test to 4000# ok. Cap w/ 50' cmt. Perf Strawn 10412-420, 10506-522 w/ 1 spf.
 11/09/04 Acdz w/ 1000 gals 15% acid. Swab.
 11/17/04 Set CIBP @ 10,390'. Test to 4000# ok. Perf Strawn Lime 10,308-336 w/ 2 spf.
 11/18/04 Acdz w/ 1500 gals 15% acid. Swab. End of 2-3/8" tbg @ 10,154'.
 Well is SI pending Engineering evaluation.

File
 Copy

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCGD guidelines , a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE Cathy Wright TITLE Sr. Eng. Tech DATE 10/14/05
wrightc@pogoproducing.com 432-685-8100
 Type or print name Cathy Wright E-mail address: Telephone No.

(This space for State use)

FOR RECORDS ONLY

APPROVED BY _____ TITLE _____ DATE OCT 19 2005
 Conditions of approval, if any: _____