

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.
30-015-30713

Indicate Type of Lease

STATE ☐

FEE ☐

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.)

Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

Name of Operator

Pogo Producing Company

Well No.

9

Address of Operator

P. O. Box 10340, Midland, TX 79702-7340

Pool name or Wildcat

Cedar Canyon Delaware

Well Location

Unit Letter J : 2260 Feet From The South Line and 1650 Feet From The East Line

Section 15 Township 24S Range 29E NMPM Eddy County

Elevation (Show whether DF, RKB, RT, GR, etc.)

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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 ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ANBANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Additional Delaware Perfs ☒

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.

07/22/03 POOH w/ rods, pump & tbg.

07/23/03 RIH & set CIBP @ 5405'. Perf Delaware 5246-68 w/ 2 spf. Test CIBP to 3000# ok. Acdz w/ 1400 gals
7-1/2% acid. Swab.

07/25/03 Frac w/ 42,000# 20/40 SLC.

07/30/03 Perf Delaware 5064-72 & 5090-96 w/ 2 spf. Set RBP @ 5196 & test to 3000# ok. Acdz w/ 1300 gals
7-1/2% acid.

07/31/03 Rel RBP @ 5196 & POH.

08/01/03 RIH w/ production equipment and return well to production.

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

SIGNATURE

Cathy Tomberlin

TITLE

Sr. Operation Tech

DATE

08/04/03

TYPE OR PRINT NAME

Cathy Tomberlin

432-685-8100

TELEPHONE NO.

(This space for State Use)

FOR RECORDS ONLY

APPROVED BY

[Signature]

TITLE

DATE

AUG 15 2003

CONDITIONS OF APPROVAL, IF ANY: