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IL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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APR 19 1982

O. C. D.  
ARTESIA, OFFICE

Form C-103  
Revised 10-

5a. Indicate Type of Lease

State ☒

Free ☐

5. State Oil & Gas Lease No.

L-6658

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)

|                                                                                                                                                                                                           |                                           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|
| 1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-                                                                                         | 7. Unit Agreement Name                    |
| 2. Name of Operator<br>Pogo Producing Company                                                                                                                                                             | 8. Form or Lease Name<br>State - 58       |
| 3. Address of Operator<br>P.O. Box 10340 Midland, Texas 79702                                                                                                                                             | 9. Well No.<br>1                          |
| 4. Location of Well<br>UNIT LETTER <u>H</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM<br>THE <u>East</u> LINE, SECTION <u>15</u> TOWNSHIP <u>24-S</u> RANGE <u>27-E</u> N.M.M. | 10. Field and Pool, or Wildcat<br>Wildcat |
| 11. Elevation (Show whether DF, RT, GR, etc.)<br>3224.9 6R 3253.9 - KB                                                                                                                                    | 12. County<br>Eddy                        |

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"/>  | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/> |                                               |

17. 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.

See Attached Sheet

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

|                                  |                                   |                         |
|----------------------------------|-----------------------------------|-------------------------|
| SIGNED <u>James R. Henry</u>     | TITLE <u>Division Engineer</u>    | DATE <u>1-29-82</u>     |
| APPROVED BY <u>W. A. Gussett</u> | TITLE <u>SUPERVISOR, DISTRICT</u> | DATE <u>APR 21 1982</u> |
| CONDITIONS OF APPROVAL, IF ANY:  |                                   |                         |