

Submit 5 Copies  
Appropriate District Office  
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

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

SEP 7 1992

O. C. D.  
OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Pogo Producing Company	Well API No. 30-015-27031
Address P.O. Box 10340, Midland, Texas 79702-7340	
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> If change of operator give name and address of previous operator	

I. DESCRIPTION OF WELL AND LEASE

Lease Name Cal-Mon Federal	Well No. 7	Pool Name, Including Formation Ingle Wells, Delaware	Kind of Lease State, Federal or Fee	Lease No. NM-19199
Location Unit Letter C : 330 Feet From The North Line and 1650 Feet From The West Line Section 35 Township 23 South Range 31 East , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Enron Oil Trading	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1188, Houston, Texas 77252					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Llano, Inc.	Address (Give address to which approved copy of this form is to be sent) 921 Sanger, Hobbs, New Mexico 88240-4917					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 35	Twp. 23S	Rge. 31E	Is gas actually connected? Yes	When? 09-10-92

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 08-09-92	Date Compl. Ready to Prod. 09-06-92	Total Depth 8400'	P.B.T.D. 8360'					
Elevations (DF, RKB, RT, GR, etc.) 3464.6 GR	Name of Producing Formation Delaware	Top Oil/Gas Pay 8125'	Tubing Depth 8088'					
Perforations 8125' to 8201'	152 holes	Delaware	Depth Casing Shoe 8400'					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2"	13-3/8"	797'	1000 sx-Circ 250 sx					
11"	8-5/8"	4275'	1525 sx-Circ 250 sx					
7-7/8"	5-1/2"	8400'	1st stage-650 sx-Circ 240 sx					
	2-7/8" tbq.	8088'	2nd stage-625 sx-TQC 2800'					

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank 09-06-92	Date of Test 09-08-92	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 280 psig	Casing Pressure 1000 psig	Choke Size 22/64"
Actual Prod. During Test	Oil - Bbls. 245	Water - Bbls. 120	Gas - MCF 190

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature Richard L. Wright  
Richard L. Wright Div. Oper. Mgr.  
Printed Name 09-11-92 (915)682-6822  
Date 09-11-92 Telephone No.

OIL CONSERVATION DIVISION

Date Approved SEP 28 1992

By ORIGINAL SIGNED BY  
MIKE WILLIAMS  
Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.