

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

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

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

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

WELL API NO.
30-015-29310

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.)		Lease Name or Unit Agreement Name Harroun 15	
Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		Well No. 5	
Name of Operator Pogo Producing Company /		Pool name or Wildcat Pierce Crossing Delaware, East	
Address of Operator P. O. Box 10340, Midland, TX 79702-7340			
Well Location Unit Letter B : 330 Feet From The North 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.) 2930 GR			

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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: Add 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.

05/18/01 TOH w/ rods & pump.

05/19/01 Latch onto RBP @ 5140' & POOH. Perf Delaware 3454'-3464' w/ 2 spf.

05/20/01 TIH w/ RBP & set @ 3750'. Test RBP to 3000# ok. Acdz 3454'-64' w/ 750 gals 7-1/2% acid. Swab.

05/21/01 Latch RBP @ 3750' & POOH. RIH w/ pump & rods. Well on production



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

SIGNATURE Cathy Tomberlin TITLE Operations Technician DATE 06-06-01

TYPE OR PRINT NAME Cathy Tomberlin TELEPHONE NO. (915)685-8100

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

APPROVED BY [Signature] TITLE _____ DATE JUN 19 2001

CONDITIONS OF APPROVAL, IF ANY: