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(June 1990)       DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT       Budget Bureau No. 1004-0135 Expires: March 31, 1993         SUNDRY NOTICES AND REPORTS ON WELLS       5. Lease Designation and Serial No.         Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals       6. If Indian. Allottee or Tribe Name         SUBMIT IN TRIPLICATE       7. If Unit or CA, Agreement Designation         I. Type of Well       Gas         [X] Well       Other         2. Name of Operator       Buffalo Federal #2         P. O. Box 10340, Midland, TX 79702-7340       432-685-8100         4. Location of Well (Footage, Sec., T., R., M., or Survey Description)       Tonto-Seven Rivers         330' FSL & 330' FWL, Section 11, T19S, R33E       Lea County, NM				•
BUREAU OF LAND MANAGEMENT         SUNDRY NOTICES AND REPORTS ON WELLS         Do not use this form for proposals to different reservoir.       M.M.32860         SUBMIT IN TRIPLICATE         1. If Use of CA. Agreenet Despective         SUBMIT IN TRIPLICATE         1. If Use of CA. Agreenet Despective         SUBMIT IN TRIPLICATE         1. If Use of CA. Agreenet Despective         SUBMIT IN TRIPLICATE         1. If Use of CA. Agreenet Despective         SUBMIT IN TRIPLICATE         1. If Use of CA. Agreenet Despective         SUBMIT IN TRIPLICATE         1. Use of CA. Agreenet Despective         SUBMIT IN TRIPLICATE         Note of Operation         Submit IN TRIPLICATE         Note of Idea of Despective Despective         Submit In Triple, R32E         Colspan="2">Idea Operating Company         Submit ID	Form 3160-5	UNITED ST.	ATES	FORM APPROVED
SUNDRY NOTICES AND REPORTS ON WELLS     Do not use this form for proposals to drift to to despin or reentry to a different reservoir.     Use "APPLICATION FOR PERMIT—" for such proposals     SUBMIT IN TRIPLICATE     T. If Use or CA. Agreement Designation     SUBMIT IN TRIPLICATE     T. If Use or CA. Agreement Designation     SUBMIT IN TRIPLICATE     T. If Use or CA. Agreement Designation     SUBMIT IN TRIPLICATE     T. If Use or CA. Agreement Designation     SUBMIT IN TRIPLICATE     T. If Use or CA. Agreement Designation     SUBMIT IN TRIPLICATE     T. If Use or CA. Agreement Designation     SUBMIT IN TRIPLICATE     T. If Use or CA. Agreement Designation     SUBMIT IN TRIPLICATE     T. If Use or CA. Agreement Designation     SUBMIT IN TRIPLICATE     T. If Use or CA. Agreement Designation     Submit and Teglobox No.     SUBMIT IN TRIPLICATE     Submit Company     Submit	(June 1990)	DEPARTMENT OF T	HE INTERIOR	Budget Bureau No. 1004-0135 Expires: March 21, 1002
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Use "APPLICATION FOR PERMIT—" for such proposals         SUBMIT IN TRIPLICATE         1. Type of Well       State of Colspany         2. Mile of Operator       B. Well None and No.         Dog Producing Company       B. Well None and No.         3. Address and Telephone No.       D. Toto Supervision         4. Location of Well (Provage, Son, T. R. M., at Survey Description       Son, T. R. M., at Survey Description         330' FSL & 330' FNL, Section 11, T19S, R33E       Into Section Rotard Provide Report         12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF SUBMISSION         12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION         CARLE RAPPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF SUBMISSION         13. Describe Proport       Charge of Plans         Product Operation Charge state       Asadementi         13. Describe Producing Company respectfully request an extension for the approved APD on the above caption of basis of access periment dets, including actimated date of tataling any proposed work. If well is directionally differed perimeted dets, including schedule this year.         Advectore of complete to include this well in our drilling schedule this year.         <				
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SUBMIT IN TRIPLICATE         1. Type of Wall         2. Mem of Operator         9. Mem of Operator         9. Mem of Operator         9. Add Wall Name and No.         1. Mem of Operator         9. Add Wall Name and No.         9. O. Box 10340, Midland, TX 79702-7340         4. Location of Will (Poolege, See, T. R. M., or Survey Description)         330' FSL & 330' FML, Section 11, T19S, R33E         12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION         12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION         12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION         13. Describe Proposed or Completed Operation Cherty state all period excite Products and the Charge of Plans         13. Describe Proposed or Completed Operation Cherty state all period excite and the states and toop period of the states and toop period excite and toop and the states and toop period e		Use APPLICATION FOR PERM	II —" for such proposals	
Image: State of Operator       Image: State of Operator       Image: State of Operator         Proge       Producting Company       Image: State of Operator       Image: State of Operator         3. Address and Telephone No.       P. O. Box 10340, Midland, TX 79702-7340       432-685-8100       Image: State of Operator         4. Location of Will (Provage, Sec. T. R. M. or Survey Description)       Image: State of Operator       Image: State of Operator       State of State of Operator         300' FSL & 330' FWL, Section 11, T19S, R33E       Image: State of Operator       Image: State of Operator       Image: State of Operator         12.       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       TYPE OF SUBMISSION       TYPE OF ACTION         I2.       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       TYPE OF ACTION         I2.       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION         I2.       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       Charge of Plane         I2.       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       Charge of Plane         I3.       Decode State State Operator         I3.       Decode State State C		7. If Unit or CA, Agreement Designation		
2. Name of Operator Progo Producing Company  3. Address and Telephone No. Progo Producing Company  4. Leaster of Weil (Postage, Sec., T. R. M. or Survey Description)  330' FSL & 330' FWL, Section 11, T19S, R33E  10. Field and Rod, or Exploratory Area TYPE OF SUBMISSION  11. Coursy or Partial, Sate  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  13. Describe Proposed or Completed Operations (Clearly state all periment details, and give periment details and consecution and measured and one vertical depths for all markers and accesspreid work. If well is directionally diffed,  Progo Producing Company respectfully request an extension for the approved APD on the above captioned well. We expect to include this well in our drilling schedule this year.  Progo Producing Company respectfully request an extension for the approved APD on the above captioned well. We expect to include this well in our drilling schedule this year.  Approx 19. June 19. Operation Tech  Proguesting Structure Type 0. Structure to this work. <sup>19</sup> 14. I hereby servity dat the foregoing is tops and correct  Support Company and correct  Support Structure Type 0. Struct				
Pogo Producing Company       9. MTAIO Federal #2         3. Address and Telephone No.       9. O. Box 10340, Midland, TX 79702-7340       432-685-8100       10. Federal #2         4. Location of Well (Proage, Sec., T. R., M. or Survey Description)       10. Federal #2       10. Federal #2         330' FSL & 330' FWL, Section 11, T19S, R33E       In the Sec. T. R., M. or Survey Description)       10. Federal #2         12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       TYPE OF ACTION         12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION         13. Describe Proposed or Completed Operations (Charty and all pertinent details, and give perform date, including estimated date of starting and measured and the vertical deptits for all markers and zone pertinent to this work.)*         13. Describe Proposed or Completed Operations (Charty and all pertinent details, and give perform date, including estimated date of starting any proposed work. If well is directionally defined grade for all markers and zone pertinent to this work.)*         Progo Producing Company respectfully request an extension for the approved APD on the above captional deptits for all markers and zone pertinent to this work.)*         Progo Producing Company respectfully request an extension for the approved APD on the above captional deptits for all markers and zone pertinent to this work.)*         Intermediate the preparing is type and correct         Strepor		8. Well Name and No.		
POGD Producing Company       S. Attress and tradpose No.         P. O. Box 10340, Midland, TX 79702-7340       432-685-8100         330' FSL & 330' FWL, Section 11, T19S, R33E       Into-Seven Rivers         330' FSL & 330' FWL, Section 11, T19S, R33E       Into-Seven Rivers         12       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION         III Councy or Print, State       Bacompetion         Subsequent Report       Recompetion         III Councy or Print, State       Charge of Plans         VIPE OF SUBMISSION       TYPE OF ACTION         III Councy or Print, State       Recompetion and Program Back         III Councy or Print, State       Recompetion and Program Back         III Councy or Print, State       Recompetion and Program Back         III Councy or Print, State       Recompetion and Program Back         IIII Councy or Print, State       Recompetion and Program Back         IIII Councy or Print, State       Recompetion and Program Back         IIII Councy or Print, State       Recompetion and Program Print, State         IIIII Councy or Print, State       Recompetion and Program Print, State         IIIII Councy or Print, State       Recompetion and Program Print, State         IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	•	Buffalo Federal #2		
P. 0. Box 10340, Midland, TX 79702-7340       432-685-8100       10. Field and Pool, or Exploratory Area         4. Location of Wid (Poolage, See, T. R., M., or Survey Description)       Tonto-Server Rivers         330' FSL & 330' FWL, Section 11, T19S, R33E       Tonto-Server Rivers         12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION         ID Mode of Innest       Abandomment         Subsequent Report       Plogging Back         ID Subsequent Report       Plogging Back         IF field Abandomment Notice       Plogging Back         ID Deprote Progond or Completed Operations (Clearly and all performed detail, and give performed date of starting every proposed work. If well is directionally defined report and measured and the vertical depths for all markers and zone performed for the approved APD on the above capition of the approved APD on the above         Pogo Producing Company respectfully request an extension for the approved APD on the above capition of well. We expect to include this well in our drilling schedule this year.         If. Interety certify field de Derepting is type and correct         Strang S		9. API Well No.		
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CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA      TYPE OF SUBMISSION     TYPE OF ACTION     Datage of Plans     Subsequent Report	330 FSL & 3.	``````````````````````````````````````		
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Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.