

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

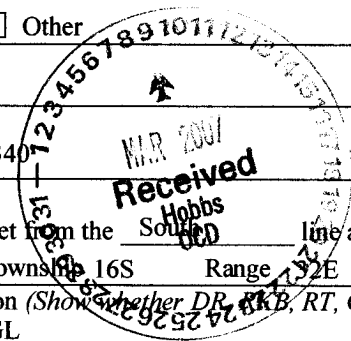
State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 May 27, 2004

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO.	30-025-29232
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. 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.)		7. Lease Name or Unit Agreement Name State "10"
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	8. Well Number 1	
2. Name of Operator Latigo Petroleum, Inc.	9. OGRID Number 227001	
3. Address of Operator P.O. Box 10340 Midland, TX 79702-7340	10. Pool name or Wildcat Anderson Ranch-Wolfcamp Southwest	
4. Well Location Unit Letter <u>O</u> : <u>660</u> feet from the <u>South</u> line and <u>1980</u> feet from the <u>East</u> line Section <u>10</u> Township <u>16S</u> Range <u>12E</u> NMPM County/Lea		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4312' GL		
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		



12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: MIT and TA status <input checked="" type="checkbox"/>	

13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Latigo Petroleum, Inc. respectfully request TA approval.

- 2/20/07 - MIRU. TOH w/rods.
- 2/21/07 - ND wellhead and NU 6" 1500 Hydraulic BOP. Released pkr @ 9542'. TOH w/jts & tbg.
- 2/22/07 - TOH w/ remaining jts. Wellbore headed up, flowed, and recovered 51 bbls. oil. Well died. It was decided to continue with T&A. TIH w/ 5 1/2" CIBP, setting tool, SN, and 275 jts. 2 3/8" tbg. Set CIBP @ 8992'. Note: Wolfcamp perf. f/ 9042'- 50', 9604'- 10', 9870'- 74', 9900'- 06', and 9942'- 46' covered and TA'd.
- 2/23/07 - Loaded 5 1/2" 17# casing, broke circulation and displaced wellbore w/ 210 BFW + corrosion inhibitor mixed. Pressure tested wellbore to 540#. Held. TOH LD w/ 275 jts. 2 3/8" N80 tbg., SN, and setting tool. ND 6" 1500 hydraulic BOP and NU 6" 900 B-1 tbg. hanger. Dug out cellar to identify intermediate and surface casing risers. Loaded, pressured wellbore to 550#, and charted 30 min. MIT test. ds. Cleaned location. RDMO
- 2/27/07 - Notified OCD. Test not witnessed.
- 3/1/07 - Ran good MIT. Press up to 540#. Held for 30 min. Well TA'd.

Original chart to OCD Hobbs

This Approval of Temporary Abandonment Expires 3/1/12

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE Lisa Hunt TITLE Regulatory Analyst DATE 03/06/2007

Type or print name Lisa Hunt E-mail address: huntl@pogoproducing.com Telephone No. (432)685-8229

For State Use Only

APPROVED BY: Larry W. Wink TITLE FIELD REPRESENTATIVE II/STAFF MANAGER DATE 1 5 2007
 Conditions of Approval (if any)

