

Submit 1 Copy To Appropriate

District Office

District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

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

Form C-103
Revised July 18, 2013

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| 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.) | | WELL API NO. 30-015-10906 |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> | | 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FED <input type="checkbox"/> |
| 2. Name of Operator Pogo Oil & Gas Operating Inc. | | 6. State Oil & Gas Lease No. E9262 |
| 3. Address of Operator 1515 Calle Sur, Ste 174 Hobbs, NM 88240 | | 7. Lease Name or Unit Agreement Name North Benson Queen Unit |
| 4. Well Location Unit Letter <u>F</u> : <u>1980'</u> feet from the <u>North</u> line and <u>1980'</u> feet from the <u>West</u> line Section <u>32</u> Township <u>18S</u> Range <u>30E</u> NMPM <u>Eddy</u> County | | 8. Well Number #42 |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3415' RKB | | 9. OGRID Number 372000 |
| | | 10. Pool name or Wildcat North Queen - Grayburg |

12. 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"/> | P AND A <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | MULTIPLE COMPL <input type="checkbox"/> | CASING/CEMENT JOB <input type="checkbox"/> | |
| DOWNHOLE COMMINGLE <input type="checkbox"/> | | | |
| CLOSED-LOOP SYSTEM <input type="checkbox"/> | | | |
| OTHER: <input type="checkbox"/> | | OTHER: MIT <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Performed MIT at 340Psi, for 5 year pressure test.
Well passed test.
Attached is the scan of the MIT chart.

Spud Date:

Rig Release Date:

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

SIGNATURE [Signature] TITLE President DATE 11/16/18
 Type or print name M. G. Merchant E-mail address: mymerch@perrocoil.com PHONE: (575) 492-1236
For State Use Only
 APPROVED BY: [Signature] TITLE Compliance Officer DATE 11-27-18
 Conditions of Approval (if any):

