Submit 3 Copies To Appropriate District	State of N	Form C-103			
Office District I	Energy, Minerals ar	May 27, 2004			
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.		
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVA	ATION DIVISION	30-015-34767		
District III	1220 South S	St. Francis Dr.	5. Indicate Type of Least STATE	se FEE [	,
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe.	NM 87505	6. State Oil & Gas Leas		J
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM			0. State Off & Gas Leas	C INO.	
87505	OFC AND REPORTS ON	WELLO	7. Lease Name or Unit	A ama ama ami	Nome
(DO NOT USE THIS FORM FOR PROPOS	CES AND REPORTS ON TALE TO DEEPE		7. Lease Name of Onit.	Agreement	Name
DIFFERENT RESERVOIR. USE "APPLIC			STATE "19"		
PROPOSALS.)  1. Type of Well: Oil Well	Gas Well 🔲 Other		8. Well Number 3		
2. Name of Operator	das Well Other	RECEIVED	9. OGRID Number		
POGO PRODUCING COMPANY		JUN 0 2 2006	017891		
3. Address of Operator			10. Pool name or Wildo	at	
P. O. BOX 10340, MIDLAND, TX	79702-7340	SON-WILL PER	WILDCAT-UPPER PE	NN	
4. Well Location					
Unit Letter_J:_	<u>1980</u> feet from the	SOUTH line and 21	00feet from the	<u>EAST</u>	line
Section 19	Township 20		NMPM EDDY	Coun	ıty
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3255'					
Pit or Below-grade Tank Application O	<u> </u>				
		est fresh water well Dist	ance from nearest surface wat	er	
Pit Liner Thickness: mil	·	mebbls; Co			
12. Check A	appropriate box to mu	icate Nature of Notice,	Report of Other Data		
NOTICE OF IN	TENTION TO:	SUB	SEQUENT REPOR	T OF:	
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK			K 🔲 ALTE	RING CAS	SING 🗌
TEMPORARILY ABANDON	CHANGE PLANS	LLING OPNS.⊠ PAN	DA		
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	Т ЈОВ	· e .	
OTHER:		OTHER:	· · · · · · · · · · · · · · · · · · ·	5 - 5 - 5	
13. Describe proposed or compl	eted operations. (Clearly s		d give pertinent dates, incl	uding estir	mated date
of starting any proposed wo					
or recompletion.					
04/18/06 Drilled 10" hole	e from 0' to 5'. Lease hold	1 @ 5'.			
I hereby certify that the information :	above is true and complete	to the best of my knowledge	e and belief. I further certif	v that any n	it or helow-
grade tank has been/will be constructed or	closed according to NMOCD gu	idelines [], a general permit [	or an (attached) alternative O	CD-approve	d plan □.
SIGNATURE CALL ///	11 (1 A T	THE ODENIC TECH	DATE: 05/20//	) ( · · ·	•
SIGNATURE (COSTOC)	ngur 11	TLE SR ENG TECH	DATE <u>05/30/0</u>	<u>10</u>	<del></del>
Type or print name CATHY WRIGH	HT E-mail address: w	rightc@pogoproducing.con	n Telephone No. 432-6	35-8100	
For State Use Only			•		0 0 2000
APPROVED BY: FOR	RECORDS ONLY	ITLE	TS A (1		0 9 2006
Conditions of Approval (if any):	11	II LE .	DAI	TE	<del></del>