## Form 3160-5 (April 2004)

**UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

| OCD-          | ARTESIA |
|---------------|---------|
| ERIOR<br>MENT | C       |
| TO ON         | MEI     |

FORM APPROVED OM B No. 1004-0137 Expires: March 31, 2007

## 5. Lease Serial No.

## SUNDRY NOTICES AND REPORTS ON WELL

| 6. | If Indian, Allottee or Tribe Name |  |
|----|-----------------------------------|--|
|    | ,                                 |  |

| Mount - Ass                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | M SUNDRY                                                                         | NOTICES AND RE                      | PORTS ON WEI                                                                 |                                    | NM-38464                                                                                                                      |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|-------------------------------------|------------------------------------------------------------------------------|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| MAR 192                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Do not use the abandoned we                                                      | ile                                 | 6. If Indian, Allottee or Tribe Name                                         |                                    |                                                                                                                               |  |  |  |
| A Company of the Comp | SUBMIT IN TRI                                                                    | e side.                             | 7. If Unit or CA/Agreement, Name and/or No.                                  |                                    |                                                                                                                               |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1. Type of Well                                                                  | Gas Well Other                      |                                                                              |                                    |                                                                                                                               |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 2. Name of Operator                                                              |                                     | 8. Well Name and No. Pure Gold A Federal # 17  9. API Well No. 30-015- 35310 |                                    |                                                                                                                               |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Pogo P                                                                           |                                     |                                                                              |                                    |                                                                                                                               |  |  |  |
| -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 3a Address P. O. Box 10340, Midla                                                | and. TX 79702                       |                                                                              |                                    | 30-015- 35310  10. Field and Pool, or Exploratory Area Sand Dunes Delaware West  11. County or Parish, State  Eddy County, NM |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 4. Location of Well (Footage, Sec., T                                            |                                     |                                                                              |                                    |                                                                                                                               |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 2090' FSL & 660' FEL,                                                            | Section 21                          |                                                                              |                                    |                                                                                                                               |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER I   |                                     |                                                                              |                                    |                                                                                                                               |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | TYPE OF SUBMISSION                                                               |                                     | ТҮРЕ                                                                         | OF ACTION                          |                                                                                                                               |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | × Notice of Intent                                                               | Acidize  XX Alter Casing            | Deepen Fracture Treat                                                        | Production (Star                   | t/Resume) Water Shut-Off Well Integrity                                                                                       |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Subsequent Report                                                                | Casing Repair Change Plans          | New Construction                                                             | Recomplete                         | Other                                                                                                                         |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Final Abandonment Notice                                                         | Convert to Injection                | ☐ Plug and Abandon ☐ Plug Back ☐                                             | ☐ Temporarily Aba ☐ Water Disposal | псоп                                                                                                                          |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | determined that the site is ready f                                              | • /                                 |                                                                              |                                    |                                                                                                                               |  |  |  |
| Hole Size                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                  |                                     | Setting Depth                                                                | Cement Qua                         | •                                                                                                                             |  |  |  |
| 26"                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 20" Sched 10                                                                     | 53#<br>48#                          | 40'                                                                          | 2.2 yds Redi<br>650 sks circu      | -mix grouted                                                                                                                  |  |  |  |
| 17-1/2"<br>11"                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 13-3/8" H-40<br>8-5/8" J-55                                                      | 48#<br>32#                          | 800'<br>4100'                                                                | 1300 sks circu                     |                                                                                                                               |  |  |  |
| 7-7/8"                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 5-1/2" J-55                                                                      | 17#                                 | Surf-1000'                                                                   |                                    | sks "C" 14.1 ppg, circ                                                                                                        |  |  |  |
| 7-7/8<br>7-7/8"                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 5-1/2" <b>J</b> -55                                                              | 15.5#                               | 1000'-6000'                                                                  |                                    | ) sks "C" 12.8 ppg, circ                                                                                                      |  |  |  |
| 7-7/8"                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 5-1/2" <b>J</b> -55                                                              | 17#                                 | 6000'-8200'                                                                  |                                    | sks "C" 12.8 ppg, circ                                                                                                        |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | TTACHED FOR                                                                      |                                     |                                                                              |                                    | @ 3900' & 6000'                                                                                                               |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                  | ROVAL<br>ler @ 522', Top of Sa      | lt @ 860', Basal Anl                                                         | hydrite @ 4024                     | 1' & Delaware Lime @ 4256'.                                                                                                   |  |  |  |
| :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 14. I hereby certify that the forego                                             | oing is true and correct            |                                                                              |                                    | <del></del>                                                                                                                   |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Name (Printed/Typed) Cathy Wright                                                |                                     | Title                                                                        | Sr. Eng Tec                        | :h                                                                                                                            |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Signature Office L                                                               | Wight                               | Date                                                                         | 03/09/0                            | APPROVED                                                                                                                      |  |  |  |
| ;                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | U                                                                                | THIS SPACE FOR I                    | FEDERAL OR STA                                                               | TE OFFICE U                        | SE                                                                                                                            |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Approved by                                                                      |                                     | Title                                                                        |                                    | Date MAR 1 3 2007                                                                                                             |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Conditions of approval, if any, are attacertify that the applicant holds legal o | r equitable title to those rights i | does not warrant or                                                          | e                                  | na bugusa                                                                                                                     |  |  |  |
| :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | which would entitle the applicant to c                                           | onduct operations thereon.          |                                                                              |                                    | WESLEY W. INGRAW                                                                                                              |  |  |  |

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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.

## Pure Gold "A" Federal #17 Pogo Producing Company March 13, 2007 Conditions of Approval

- 1. 20" Sched 10 53# casing to be cemented to surface with ready mix.
- 2. 13-3/8" H-40 48# casing to be set a minimum of 25 feet into the Rustler Anhydrite at approximately 800 feet and above the salt.
- 3. 8-5/8" J-55 32# casing to be set at least 100 feet below and not more than 600 feet below the base of the salt at approximately 4100 feet.

WWI 031307