

DISTRIBUTION		
SANTA FE		
FILE		
U.S.O.S.		
LAND OFFICE		
OPERATOR		

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

RECEIVED

5a. Indicate Type of Lease	
State ☒	Fee ☐
5. State Oil & Gas Lease No. LG-4548	
7. Unit Agreement Name	
8. Farm or Lease Name	
9. Well No. 1	
10. Field and Pool, or Wildcat Morrow	
12. County Eddy	

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.)

1. OIL WELL ☐ GAS WELL ☒ OTHER-
ARTESIA, OFFICE

2. Name of Operator
Pogo Producing Company

3. Address of Operator
Box 10340 Midland, Texas 79702

4. Location of Well
UNIT LETTER M 3300 FEET FROM THE South LINE AND 660 FEET FROM
THE West LINE, SECTION 2 TOWNSHIP 21S RANGE 28E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
3318.8' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☒	OTHER ☐

17. 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.

01-21-80: Spudded well @ 6:00 P.M. MST on 1-20-80.

01-22-80: TD 520' Red beds. Ran 12 jts. 13 3/8" 54.5# K-55 Rng 3 ST&C, 516' w/shoe @ 513', baffle @ 474', bottom 2 jts. thread-locked, centralizer on bottom jt. Rig Howco cement w/525 sxs Class "C" w/2% CaCl₂, 14.8 to 15 ppg, good returns throughout job, circ. 84 sxs, bump plug w/150#, held OK. Plug down 1 P.M. 1-21-80. Cut off csg., weld on head, NU.

01-23-80: Test blind rams & casing w/1000# - OK. LD 2-9 1/2" DC. Test Hydril & pipe rams w/1000# - OK. Drill plug & baffle @ 474'; clean out cement.

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

SIGNED [Signature] TITLE Div. Operations Manager DATE 1/24/80

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: