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LAND OFFICE	
OPERATOR	

SEP 25 1987

C. D. OFFICE

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

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG SALS TO A DIFFERENT RESERVOIR.
USE APPLICATION FOR PERMIT TO DRILL OR TO DEEPEN OR PLUG SALS TO A DIFFERENT RESERVOIR.)

OIL WELL ☐ GAS WELL ☒ OTHER
Name of Operator Pogo Producing Company
Address of Operator P.O. Box 10340, Midland, Texas 79702
Location of Well UNIT LETTER M 3300 FEET FROM THE South LINE AND 660 FEET FROM THE West LINE SECTION 2 TOWNSHIP 21-S RANGE 28-E

11. Elevation (Show whether DF, RT, GR, etc.)

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 JOBS ☐	

12. 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.

- 9/19/87 PBDT 11,215'. MIRU Carr Well Service. Remove Tree, RIH 2 3/8" Tbg OE to 9200'. Spot 35 sxs cmt 9200' to 8900'. Spot 35 sxs cmt 7200' to 6900'. POH & latch in casing & pull 170,000#.
- 9/20/87 PBDT 6900'. Cut 5 1/2" csg & 5130', csg not free. RIH tbg OE to 5200', spot 35 sxs cmt 5200' to 4900' & POH. Install jacks, csg free @ 3749'. Cut csg @ 3710'. POH & LD 78 jts 5 1/2" 17# S-95 LTC csg.
- 9/21/87 PBDT 4900'. POH & LD 20 jts 5 1/2" 17# S-95 LTC csg. RIH tbg OE to 3760', spot 40 sxs cmt @ 3760'. Tagged top of cmt @ 3580'. POH to 3300'. Spot 50 sxs cmt 3300' to 3153'. POH & LD tbg. Cut off 8 5/8" & 13 3/8" csg. Spot 35 sxs cmt at surface.
- 9/22/87 Weld on plate & dry hole marker. Well Plugged & Abandoned 9/21/87.

Post ID-2
10-5-87
P+H

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

SIGNED [Signature] TITLE Division Operations Manager DATE 9/22/87

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: