Submit 3 Copies
to Appropriate
District Office

DISTRICT II

State of New Mexico Energy, Minerals and Natural Resources Department

157	
00	Form C-103 Revised 1-1-8

DISTRICT I		
P O Box 1980	Hobbs	NM 88240

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION 2040 Pach Santa Fe.

WELL API NO.	
30-015-3163	16

P.O. Drawer DD, Artesia, NM 88210 DISTRICT III

neco St. NM 87505			30-015-31636		
		3	sIndicate Type of Lease		
	*			STATEXX	FEE
Do Ac.	222	1	State Oil & Gas Lease N	lo.	

1000 Rio Brazos Rd., Aztec, NM 87410) 	Och Ecr. 200	₅State Oil & Gas Lea	se No.	
	NOTICES AND REPORTS ON REPORTS ON REPOPOSALS TO DRILL OR TO DEE ESERVOIR. USE "APPLICATION FOR RM C-101) FOR SUCH PROPOSALS.)	1//~~	rLease Name or Unit	Agreement Name	
Type of Well: OIL GAS WELL WELL	X OTHER	6929242616	McMillan 24	1 State	
*Name of Operator Pogo Producing Com	pany!		⊌Well No.		
P. 0. Box 10340, M	lidland. TX 79702-7340		Pool name or Wildca		
	O Feet From The South	Line and 660	Feet From The	East	Line
Section 24	Township 20S	Range 26E	NMPM	Eddy	County
	oElevation (Show whether 3278	·			
11 Charl	k Annronrioto Davita Indianti	Alat CALL -		_	

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PLUG AND ABANDON PERFORM REMEDIAL WORK REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON** CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ANBANDONMENT **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB Add Wolfcamp Perfs OTHER: OTHER:

n2Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Pogo Producing Company request permission to add Wolfcamp perfs to the subject well. The proposed perfs are 7966'-78' & 7934'-55'. Pogo also request permission to flow subject well at an accelerated rate to determine reservoir characteristics and potential. Pogo will make up the expected production overage during the next six months.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE TITLE Division Operations Mgr DATE 09/12/02 Richard L. Wright TYPE OR PRINT NAME (915)685-8100 TELEPHONE NO. (This space for State Use) ORIGINAL SIGNED BY TIM W. GUM SEP 23 2 DISTRICT II SUPERVISOR