

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Pogo Producing Company	Well API No. 30-015-20751
Address P.O. Box 10340, Midland, Texas 79702-7340	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Mobil Federal	Well No. 1	Pool Name, including Formation Wildcat, Delaware	Kind of Lease State, Federal or Fee	Lease No. NM-0281482-A
Location Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East Line Section 29 Township 23 South Range 31 East , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate Enron Oil Trading <input checked="" type="checkbox"/> EOTT Energy Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1188, Houston, Texas 77252		
Name of Authorized Transporter of Casinghead Gas El Paso Natural Gas	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, Texas 79978		
If well produces oil or liquids, give location of tanks.	Unit J Sec. 29 Twp. 23S Rge. 31E	Is gas actually connected? Yes	When? 03-22-73

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back <input checked="" type="checkbox"/>	Same Res'v	Diff Res'v <input checked="" type="checkbox"/>
Date Spudded 09-30-72	Date Compl. Ready to Prod. 03-21-92	Total Depth 14,890'	P.B.T.D. 8,000'					
Elevations (DF, RKB, RT, GR, etc.) 3351.5' GR	Name of Producing Formation Delaware	Top Oil/Gas Pay 7,820'	Tubing Depth 7,767'					
Perforations 7820'-7856'	Depth Casing Shoe 12,492'							
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
26"	20"	740'	1200 sx-Circ 300 sx					
17-1/2"	13-3/8"	4049'	1660 sx-Circ 450 sx					
12-1/4"	9-5/8"	12492'	1350 sx-Circ Cmt Top-Surf					
8-1/2"	5-1/2" liner	12,001'-14,854'	1400 sx					

V. TEST DATA AND REQUEST FOR ALLOWABLE 2-7/8" 7767'

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

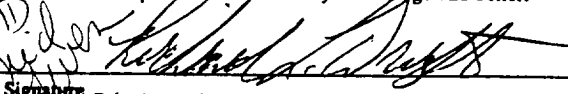
Date First New Oil Run To Tank 03-21-92	Date of Test 03-24-92	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 940 psig	Casing Pressure 1250 psig	Choke Size 14/64"
Actual Prod. During Test	Oil - Bbls. 370	Water - Bbls. 9	Gas - MCF 422

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature 
Richard L. Wright Div. Oper. Supt.
Printed Name Title
March 25, 1992 (915)682-6822
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved APR 28 1992

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.