

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐
2. NAME OF OPERATOR
Pogo Producing Company
3. ADDRESS OF OPERATOR
P. O. Box 10340, Midland, Texas 79702-7340
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
1980' FNL & 660' FWL of Section 28

RECEIVED

JAN 15 '91

C.C.D.
ARTESIA, OFFICE

5. LEASE DESIGNATION AND SERIAL NO
NM-40659
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Pure Gold "D" Federal
9. WELL NO.
1
10. FIELD AND POOL, OR WILDCAT
Wildcat - Delaware
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 28, T-23-S, R-31-E
12. COUNTY OR PARISH
Eddy
13. STATE
NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Plug back to Brushy Canyon

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

XX

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

1-01-91 Well going to tank battery 12-31-91. 18 hrs produced 68 B0, 138 BW.

1-01-91 -Testing
1-06-91

1-07-91 State potential - 24 hrs 81 B0, 140 BW, 82 MCF (9 spm) - GOR 1012, GR 42.5

RECEIVED
JAN 8 10 35 AM '91
CARLSBAD
AREA OFFICE
BLS

18. I hereby certify that the foregoing is true and correct.

SIGNED

TITLE

Division Oper. Supervisor

DATE

1/7/91

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

JAN 14 1991

*See Instructions on Reverse Side
CARLSBAD, NEW MEXICO