NM OIL CONS. COMMISSION

Drawer DD

88210

Form Approved.

Dec. 1973 Artesia, Na Oo	Dudget Bureau (10. 42 (1742)
UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	NM 15433
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTED WELLS	7. UNIT AGREEMENT NAME
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas well other APR 18 1983	NEL
2. NAME OF OPERATOR / O. C. D.	3
Pogo Producing Company ARTESIA, OFFICE	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Loving Cherry Canyon
P.O. Box 10340 Midland, Texas 79702	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA
below.)	Sec. 9, T-23-S, R-28-E
AT SURFACE: 660' FSL & 890' FEL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL:	Eddy New Mexico
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	—
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 3044.8 GR
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT QF:	
TEST WATER SHUT-OFF	
FRACTURE TREAT	- • • • · · · · · · · · · · · · · · · ·
SHOOT OR ACIDIZE	
REPAIR WELL	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING \(\Boxed{\text{PR}} \)	7 (203 changé on Form 9–330.)
MULTIPLE COMPLETE	1 1099
CHANGE ZONES	n nee
ABANDON*	Market of the second of the se
(other) Run & cmt 8 5/8" csg.	The second secon
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stating including estimated date of starting any proposed work. If well is measured and true vertical depths for all markers and zones pertine	directionally drilled, give subsurface locations and
83 - TD 453'. TD 12 1/4" hole at 453'. Ran 11 jt	t (456.16') 8 5/8" 24# K-55 ST&C
Range 3 Csg & shoe 1.2'. Shoe & 2 5 on 1, 3, 5th jts. Casing shoe at 4	jts above thread locked. Centralizers
w/285 sx Cl C w/2% CaCl2 and 1/4#	celloseal per sx. Circ 115 sx. CIP
at 11:45 am MST 3/31/83. Witnesse	ed by Mr. Coke w/BLM. WOC 17 1/4
hr.	55 25 5 50.65, 52
33 - TD 1300'. WOC additional 7 1/2 hrs. (Total	
equipment to 1000 psi 30 min ok. S	Start drl cmt & new formation.
• •	

_ Set @ ____ Ft. Subsurface Safety Valve: Manu. and Type ____ 18. I hereby certify that the foregoing is true and correct TITLE Division Engineer DATE 4/5/83 ACCEPTED FOR AEGORPHIS space for Federal or State office use) APPROVED BY (ORIG. SGD.) DAVID R. GLASS TITLE CONDITIONS OF APPROVAP 15 1983 _____ DATE __