Submit 3 Copies to Appropriate District Office State of New Mexico Energy, Minerals and Natural Resources Department of the Company of the C	Form C-103 Revised 1-1-89
DISTRICT P.O. Box 1980, Hopps, NM 88240 2040 Pacheco St. Santa Fe NM 87505	WELL API NO. 30-015-24452
P.O. Drawer DD. Artesia, NM 88210 RTESIA 00	sIndicate Type of Lease STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	eState Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	K TO A 7-Lease Name or Unit Agreement Name Lightfoot
Type of Well: OIL GAS WELL WELL OTHER	
2Name of Operator Pogo Producing Company	₅Well No. 1
³ Address of Operator P. O. Box 10340, Midland, TX 79702-7340	₃Pool name or Wildcat Malaga Delaware
4Well Location Unit LetterJ :1780	2460 Feet From The East Line
Section 14 Township 24S Range □ Elevation (Show whether DF, RKB, RT, GR, etc. 2977' GR	28E NMPM Eddy County .)
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 WO	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE D	RILLING OPNS. PLUG AND ANBANDONMENT
PULL OR ALTER CASING CASING TEST	AND CEMENT JOB
OTHER: TAY	
12Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.	
POH w/ rods & pump. ND WH. NU BOP. POH w/ 191 jts 2-7/8" tbg. Knock CIBP down hole to 6350'. GIH w/ CIBP on wireline. Set plug @ 6075'. Circ hole w/ pkr fluid. Test CIBP & csg to 500# ok. ND BOP. NU WH. Test csg to 500# for 30 mins ok. Mike Bratcher w/ the NMOCD was on location and ok'd testing. Well TA'd 3/22/02.	
· · · · · · · · · · · · · · · · · · ·	ned Status approved
	22-03
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE Coffy Amberl' TITLE Sr. Opera	tion Tech DATE 03-28-02
TYPE OR PRINT NAME Cathy Tomberlin	TELEPHONE NO. 915-685-8100
(This space for State Use)	-// APR 3 2002
APR 3 2002 CONDITIONS OF APPROVAL, IF ANY:	



