State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088 RECEIVED
Santa Fe, New Mexico 87504-2088

SEP 14 '90

WELL API NO.
30-015-25098

5. Indicate Type of Lease
STATE ☐   FEE ☒

6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS   O. C. D.
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name
Lightfoot "Com"

1. Type of Well:
OIL WELL ☐   GAS WELL ☒   OTHER

2. Name of Operator
Pogo Producing Company

8. Well No.
2

3. Address of Operator
P. O. Box 10340   Midland TX   79702-7340

9. Pool name or Wildcat
Malaga Morrow

4. Well Location
Unit Letter __P__ : __660__ Feet From The ____South____ Line and ____660____ Feet From The ____East____ Line

Section __14__   Township __24 South__   Range __28 East__   NMPM   __Eddy__   County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
2978.5' GR

11.   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 WORK ☒	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: _____ ☐		OTHER: _____ ☐	

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

SEE ATTACHMENT

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE _____   TITLE Dist. Drlg. & Prod. Supt   DATE 9/12/90
R. L. Wright

TYPE OR PRINT NAME   TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

APPROVED BY _____   TITLE _____   DATE SEP 25 1990

CONDITIONS OF APPROVAL, IF ANY: