

NEW MEXICO COMMISSION UNITED STATES
DEPARTMENT OF THE INTERIOR
Artesia, NM 88210 GEOLOGICAL SURVEY

30-015-25176

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒DEEPEN ☐PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☐GAS
WELL ☒OTHER ☐

2. NAME OF OPERATOR

Pogo Producing Company ✓

3. ADDRESS OF OPERATOR

P.O. Box 10340 Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

At surface

1980' FNL & 1980' FWL

At proposed prod. zone

1980' FNL & 1980' FWL

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

35 Miles west of Jal, New Mexico

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST

PROPERTY OR LEASE LINE, FT.

(Also to nearest drlg. unit line, if any)

1980

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

1361' SSE

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

3486.6' GR

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
26	20	94	660	1125 SXS CIRCULATE
17 1/2	13 3/8	54.50, 61 & 68	4,400	3850 SXS CIRCULATE
12 1/4	9 5/8	40, 43.50, 47 & 53.50	11,950	2650 SXS
8 1/2	7	35	14,400	350 SXS
6 1/8	5	15	15,400	100 SXS

Proposal is to drill a well through the Morrow formation. Adequate logs will be run to evaluate all zones below the Delaware formation.

Cement will be circulated to the surface on the 20" surface casing and the 13 3/8" Intermediate casing.

BOP Program: From 600' to 11,950' 3000# WP
From 11,950' to 15,500' 10,000# WP

Natural gas on the lease is not dedicated.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED

TITLE Division Operations Manager DATE 1/4/85

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions On Reverse Side

APPROVAL SUBJECT TO
GENERAL REQUIREMENTS AND
SPECIAL STIPULATIONS
ATTACHED