IN OIL CONS. COMMISSION

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APR -3 1985

## awer DD UNITED STATES G1288 ME DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

Budget Bureau No. 42-R1424 5. LEASE

NM 19199

Form Approved.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

O. C. D.

ARTESIA, O

OFFISUNDEY NOTICES AND REPORTS ON WELLS  (Do not use this form for proposals to drill or to deepen or plug back to a different	7. UNIT AGREEMENT NAME  8. FARM OR LEASE NAME Cal-Mon	
reservoir. Use Form 9–331–C for such proposals.)		
1. oil gas well other	9. WELL NO.	
2. NAME OF OPERATOR		
Pogo Producing Company W	10. FIELD OR WILDCAT NAME	
3. ADDRESS OF OPERATOR	Jud Sand Dunes Morrow	
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 below.)	AREA Sec. 35, T-23-S, R-31-E	
AT SURFACE: 1980' FNL, 1980' FWL AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE New Mexico	
AT TOTAL DEPTH: 1980' FNL, 1980' FWL	14. API NO.	
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,		
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 3486.6 GR	
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:		
TEST WATER SHUT-OFF		
REPAIR WELL	(NOTE: Report results of multiple completion or zone change on Form 9-330.)	

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.)\*

3/19/85 - Spud well @ 6:30 pm MST

(other) Spud and run 20" csq.

3/22/85 - TD 600' MW 9.8#

MULTIPLE COMPLETE **CHANGE ZONES** ABANDON\*

8 Hrs. Drlq

1/2 Hr. Svy & svc rig

1 Hr. Circ

2 1/4 Hrs. Svy & MOH, no correction

2 3/4 Hrs. Ran 7 jts (274.38') 20" 94# K-55 ST&C Rg 3 csg + 8 jts (320.60') 20" 94# H-40 ST&C Rg 3 csg. Stab in shoe (3.75'). Total string 598.73'. Stab in shoe + 2 jts thrd lkd. Cent on 1, 3, 5, & 7th its.

2 1/2 Hrs. MU cementing tools & RIH 5" DP

Subsurface Safety Valve: Manu. and Type	CONTINUED ON ATTACHED SHEET	Set @ Ft
18. I hereby certify that the foregoing is true and	correct	25/85
	space for Federal or State office use)	
APPROVED BY ACCEPTED FOR RECORD CONDITIONS OF APPROVAL, IF ANY:	TITLE DATE	

APR 2 1985

\*See Instructions on Reverse Side