

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 & 2180' FWL

At proposed prod. zone

1980' FNL & 2180' 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. 200'

16. NO. OF ACRES IN LEASE

640

19. PROPOSED DEPTH

6400'

17. NO. OF ACRES ASSIGNED
TO THIS WELL

40

20. ROTARY OR CABLE TOOLS

Rotary

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

3482.7' GR

22. APPROX. DATE WORK WILL START*

August 1, 1985

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12 1/4"	8 5/8	24	820'	320 sxs CIRCULATE
7 7/8	5 1/2	14 & 15.5	6400'	1150 sxs

The proposal is to drill a well through the Cherry Canyon formation. Adequate logs will be run to evaluate all zones below the Delaware formation.

Cement will be circulated to the surface on the 8 5/8" surface casing & 5 1/2" production casing.

Completion or abandonment will be performed in accordance with prudent practices and regulatory requirements.

BOP Program: From 820' to 6400' 3000# WP

Natural gas on 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

Petroleum Engineer

DATE 6/28/85

(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