

Submit: 5 Copies  
Appropriate District Office  
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

State of New Mexico  
Energy, Minerals and Natural Resources Department

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

RECEIVED

MAR 21 1991

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

O. C. D.  
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Pogo Producing Company		Well API No.
Address P. O. Box 10340, Midland, Texas 79702-7340		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Oil (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal 23	Well No. 1	Pool Name, Including Formation Livingston Ridge, Delaware	Kind of Lease State, <u>Federal</u> or Fee	Lease No. NM62589
Location Unit Letter <u>P</u> : <u>660</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line Section <u>23</u> Township <u>22-South</u> Range <u>31-East</u> , NM PM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Enron Oil Trading	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1188, Houston, Texas 77252					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Texaco Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 730, Hobbs, New Mexico 88240					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 23	Twp. 22S	Rge. 31E	Is gas actually connected? yes	When? October 1, 1990

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well	Workover X	Deepen	Plug Back X	Same Res'v X	Diff Res'v
Date Spudded 6-22-90	Date Compl. Ready to Prod. 8-03-90		Total Depth 8420'		P.B.T.D. 8012' MD			
Elevations (DF, RKB, RT, GR, etc.) 3574.0' GR	Name of Producing Formation Brushy Canyon, Delaware		Top Oil/Gas Pay 7046' oil		Tubing Depth 7100'			
Perforations (8090-8198') OA (TA) - (7046-7065') Active					Depth Casing Shoe 8420'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		845'		800 sks-circ 210 sks			
11"	8-5/8"		4394'		1340 sks-circ 250 sks			
5-1/2"	5-1/2"		8420'		1240 sks-stg tool @6200			
	2-7/8 N-80 6.5		7100'					

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank 3-15-91	Date of Test 3-16-91	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure 25	Casing Pressure 25	Choke Size N/A
Actual Prod. During Test	Oil - Bbls. 110	Water - Bbls. 124	Gas- MCF 41

GAS WELL

GOR=373/1

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature  
Richard L. Wright Division Oper. Supervisor  
Printed Name  
3/19/91 Title  
(915) 682-6822  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAR 29 1991

By ORIGINAL SIGNED BY  
MIKE WILLIAMS  
Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

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ORIGINAL RECORD  
MADE BY  
SECTION 10-100000

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