Submit 3 Copies to Appropriate District Office

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
Santa Fe, New Mexico 87504-2088

RECEIVED
MAY 16 1991
O. C. D.
ARTESIA, OFFICE

WELL API NO.
30-015-26663

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(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
Urquidez

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

2. Name of Operator
Pogo Producing Company

8. Well No.
4

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

9. Pool name or Wildcat
East Loving, Delaware

4. Well Location
Unit Letter M : 380 Feet From The South Line and 990 Feet From The West Line

Section 10 Township 23-S Range 28-E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3000.9 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: Stimulating	☒		

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.

4-25-91: D/S acid perfs 6079-6095' 1500 gals 15% HCl AIR 4 BPM 1000 PSI - ISIP 870 - Frac perfs w/10,000 gals 35# linear pad w/13,500# 20/40 sd in 20# linear gel - stage 1 - 3 PPg - ISIP 920 - AIR 20 BPM 1280 PSI

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

SIGNATURE Richard L. Wright TITLE Div. Oper. Supervisor DATE 5/15/91

TYPE OR PRINT NAME Richard L. Wright TELEPHONE NO. (915) 682-6822

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT II TITLE DATE MAY 22 1991

CONDITIONS OF APPROVAL, IF ANY: