

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

REC ED

Form C-101
Revised 1-1-89

MAY 20 1991

OIL CONSERVATION DIVISION

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

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

API NO. (assigned by OCD on New Wells)

OFFICE 30-015-26255

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☒

RE-ENTER ☐

DEEPEN ☐

PLUG BACK ☐

b. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER ☐

SINGLE
ZONE ☒

MULTIPLE
ZONE ☐

7. Lease Name or Unit Agreement Name

URQUIDEZ

2. Name of Operator

POGO PRODUCING COMPANY ✓

8. Well No.

5

3. Address of Operator

P.O. BOX 10340, MIDLAND, TEXAS 79702

9. Pool name or Wildcat ~~UNDES. SOUTH~~
~~CULEBRA BLUFF BONE SPRINGS~~

4. Well Location

Unit Letter

L

: 2310

Feet From The

SOUTH

Line and

990

E. ~~having Delaware~~
Feet From The WEST Line

Section

10

Township

23-S

Range

28-E

NMPM

EDDY

County

10. Proposed Depth

6450'

11. Formation ~~Delaware~~
~~BONE SPRINGS~~

12. Rotary or C.T.
ROTARY

13. Elevations (Show whether DF, RT, GR, etc.)

3019.4' GL

14. Kind & Status Plug. Bond

BLANKET

15. Drilling Contractor

TO BE SELECTED

16. Approx. Date Work will start

UPON APPROVAL

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12-1/4"	8-5/8"	24#	550'	350	SURFACE
7-7/8"	5-1/2"	15.5#	6450'	1200	SURFACE

PROPOSAL IS TO TEST UPPER BONE SPRINGS SAND.

CEMENT IS TO BE CIRCULATED TO SURFACE ON BOTH CASING STRINGS.

MUD PROGRAM: SPUD MUD TO 550'. BRINE TO TOTAL DEPTH.

BOP SKETCH IS ATTACHED.

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 11/29/91
UNLESS DRILLING UNDERWAY

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. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE

Richard L. Wright

TITLE

Dist. Dirg. and Prod. Supt. DATE 5-22-91

TYPE OR PRINT NAME

Richard L. Wright

915-682-6822 TELEPHONE NO.

(This space for State Use) ORIGINAL SIGNED BY

MIKE WILLIAMS

APPROVED BY SUPERVISOR, DISTRICT II

TITLE

DATE

MAY 29 1991

CONDITIONS OF APPROVAL, IF ANY:

Submit to Appropriate
District Office
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Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

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WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator POGO PRODUCING CO.			Lease URQUIDEZ		Well No. 5
Unit Letter L	Section 10	Township 23 SOUTH	Range 28 EAST	County NMNM EDDY	
Actual Footage Location of Well: 2310 feet from the SOUTH line and 990 feet from the WEST line					
Ground level Elev. 3019.4'	Producing Formation <i>Dolomitic</i> BONE SPRINGS		Pool UNDESIGNATED E. Loving Delaware SOUTH CULEBRA BLUFF BONE SPRINGS		Dedicated Acreage: 40 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or ink on the plat below.

2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?

☐ Yes ☐ No If answer is "yes" type of consolidation

If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.

OPERATOR CERTIFICATION

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

Signature

Printed Name

Richard L. Wright

Position

Dist. Drlg. & Prod. Supt.

Company

POGO PRODUCING COMPANY

Date

May 22, 1991

SURVEYOR CERTIFICATION

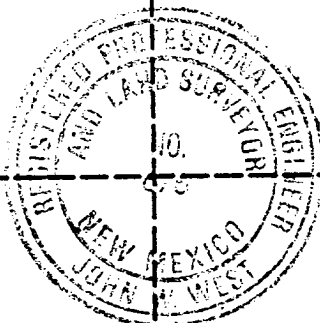
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

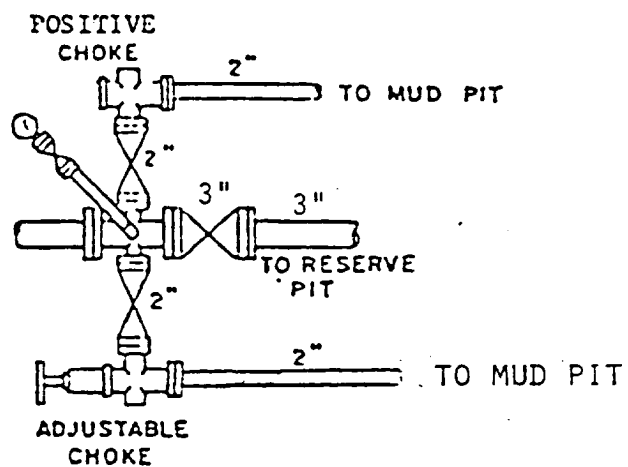
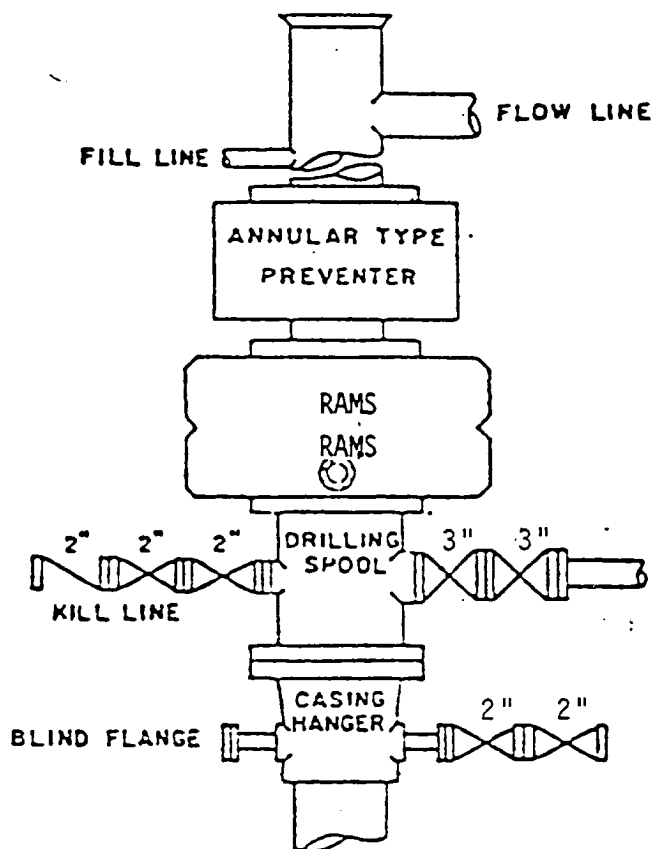
Date Surveyed

May 14, 1991

Signature & Seal of
Professional Surveyor

Certification No. JOHN M. WEST, 676
RONALD J. EIDSON, 3239





BOP STACK

3000 PSI WORKING PRESSURE

BOP ARRANGEMENT