

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Pogo Producing Company	Well API No. 30-015-26828
Address P.O. Box 10340, Midland, Texas 79702-7340	
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Other (Please explain) <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator _____	

CASINGHEAD GAS MUST NOT BE
PLACED AFTER 5/1/92
UNLESS AN EXCEPTION FROM
THE B.L.M. IS OBTAINED

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal 1	Well No. 2	Pool Name, Including Formation Livingston Ridge, Delaware	Kind of Lease State, Federal or Fee	Lease No. NM-12845
Location Unit Letter J : 2310 Feet From The South Line and 1980 Feet From The East Line Section 1 Township 22 South Range 31 East, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Enron Oil Trading	Effective 4-1-94	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 Texaco, Inc.	<input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 K Sec. 1 Twp. 22S Rge. 31E	Is gas actually connected? No	When? W/O Fed. Right-of-Way

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

2-8-92

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded Jan. 10, 1992	Date Compl. Ready to Prod. Feb. 5, 1992		Total Depth 8530'		P.B.T.D. 8485'			
Elevations (DF, RKB, RT, GR, etc.) 3584.7 GR	Name of Producing Formation Delaware, Brushy Cyn.		Top Oil/Gas Pay 7080'		Tubing Depth 7127'			
Perforations 7080'-7097' 2 spf, 34 holes				Depth Casing Shoe 8530'				
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8" 61#		828'		1025-Circ 350 sx			
11"	8-5/8" 32#		4303'		1625-Circ 250 sx			
7-7/8"	5-1/2" 15.5# & 17#		8530'		1375 sx-TOC 2180 CBL			
	2-7/8"		7127' EOT					

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 Feb. 11, 1992	Date of Test Feb. 16, 1992	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure 150 psi	Casing Pressure 50 psi	Choke Size N/A
Actual Prod. During Test	Oil - Bbls. 92	Water - Bbls. 182	Gas - MCF 155

GAS WELL

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
Printed Name Richard L. Wright Div. Oper. Supt.
Date Feb. 20, 1992 Telephone No. (915) 682-6822

OIL CONSERVATION DIVISION

Date Approved FEB 28 1992
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.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.