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DISTRICT II
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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

JAN 17 1992

O. C. D.
ARTESIA OFFICE

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. 30-015-26854
Address P.O. Box 10340, Midland, Texas 79702-7340		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input 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 26	Well No. 5	Pool Name, including Formation Linginston Ridge, Delaware	Kind of Lease State, Federal or Fee	Lease No. NM-62590
Location Unit Letter B : 330 Feet From The North Line and 2230 Feet From The East Line Section 26 Township 22 South Range 31 East, NMPM, Eddy 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 1183, 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 A	Sec. 26	Twp. 22S	Rge. 31E	Is gas actually connected? Yes	When? 01-08-92

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 12-03-91	Date Compl. Ready to Prod. 01-08-92		Total Depth 8475'		P.B.T.D. 8436'			
Elevations (DF, RKB, RT, GR, etc.) 3571.5' GR	Name of Producing Formation Delaware, Brushy Cyn		Top Oil/Gas Pay 7024'		Tubing Depth 7075'			
Perforations 7024'-7044', 2 JSPF, 20', 40 holes					Depth Casing Shoe 8475'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		820'		1025 sx, Circ 250 sx			
11"	8-5/8"		4335'		1675 sx, Circ 426 sx			
7-7/8"	5-1/2"		8475'		1st Stg-700 sx, Circ 237 sx			
					2nd Stg-730 sx, TOC @ 2346'-CBL			
					DV Tool @ 6216'			

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 01-10-92	Date of Test 01-13-92	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure 30	Casing Pressure 50	Choke Size 1-31-92 comp x BK
Actual Prod. During Test 184	Oil - Bbls. 107	Water - Bbls. 77	Gas- MCF 35 GOR 327:1

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 Div. Oper. Supt.
Printed Name Jan. 16, 1992 Title (915)682-6822
Date Jan. 16, 1992 Telephone No. (915)682-6822

OIL CONSERVATION DIVISION

Date Approved JAN 23 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.