

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

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

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

46404

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Pogo Producing Company		Well API No. 30-015-26860
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 12	Well No. 5	Pool Name, Including Formation Livingston Ridge, Delaware	Kind of Lease State, Federal or Fee	Lease No. NM-29233
Location Unit Letter D : 660 Feet From The North Line and 330 Feet From The West Line Section 12 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 <input checked="" type="checkbox"/>	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"/>	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 E	Sec. 12	Twp. 22S	Rge. 31E	Is gas actually connected? Yes	When? January 22, 1992

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 X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 12-12-91	Date Compl. Ready to Prod. 01-18-92		Total Depth 8460'		P.B.T.D. 8416'			
Elevations (DF, RKB, RT, GR, etc.) 3553 GR	Name of Producing Formation Delaware		Top Oil/Gas Pay 7022'		Tubing Depth 6977'			
Perforations 7022'-7077' (50'-100 holes)					Depth Casing Shoe 8460'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8" - 61#		810'		950 sx-Circ 250 sx			
11"	8-5/8" - 32#		4403'		1675 sx-Circ 350 sx			
7-7/8"	5-1/2" - 17# & 15.5#		8460' 1st Stg.		710 sx-Circ 150 sx			
			2nd Stg.		670 sx-TOC @ 2156'			

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 01-18-92	Date of Test 01-19-92	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs.	Tubing Pressure 90	Casing Pressure 480	Choke Size 30/64"
Actual Prod. During Test 413	Oil - Bbls. 227	Water - Bbls. 186	Gas- MCF 150

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
January 22, 1992 (915)682-6822
Date
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JAN 31 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.