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

State of New Mexico
Energy, Minerals and Natural Resources Department

RECEIVED

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
P.O. Box 100 Rio Brazos Rd., Aztec, NM 87410

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

| | |
|--|------------------------------|
| Operator Pogo Producing Company | Well API No. 30-015-26941 |
| Address P.O. Box 10340, Midland, Texas 79702-7340 | |
| Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input type="checkbox"/> Change in Transporter of: Oil <input type="checkbox"/> Gas <input type="checkbox"/> Condensate <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Other (Please explain) | |
| Change of operator give name and address of previous operator | |

CONFIDENTIAL

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|--|--|-----------------------|
| Lease Name Federal 26 | Well No. 7 | Pool Name, Including Formation Livingston Ridge, Delaware | Kind of Lease State, Federal or Fee | Lease No. NM-62590 |
| Location Unit Letter <u>F</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u> Line Section <u>26</u> Township <u>22 South</u> Range <u>31 East</u> , 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"/> or Condensate <input 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"/> 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 | | | | |
| Well produces oil or liquids, or location of tanks. | Unit A | Sec. 26 | Twp. 22S | Rge. 31E | Is gas actually connected? Yes | When? May 17, 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) X | Oil Well X | Gas Well | New Well X | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v |
| Date Spudded 4-01-92 | Date Compl. Ready to Prod. 5-15-92 | Total Depth 8400' | P.B.T.D. 8354' | | | | | |
| Deviation (DF, RKB, RT, GR, etc.) 3531.1 G.R. | Name of Producing Formation Delaware | Top Oil/Gas Pay 6960' | Tubing Depth 6968' | | | | | |
| Formations 6960'-6986' (26') 52 holes | | | Depth Casing Shoe 8400' | | | | | |

TUBING, CASING AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|-----------|----------------------|------------------------|---|
| 17-1/2" | 13-3/8" | 815 | 1000 sx-circ 175 sx |
| 11" | 8-5/8" | 4265 | 1600 sx-circ 210 sx |
| 7-7/8" | 5-1/2" | 8400 - Stg tool @ 6199 | 1st stg 700 sx-circ 150 sx 2nd stg 615 sx-TOC 1708 |

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 05-15-92 | Date of Test 05-19-92 | Producing Method (Flow, pump, gas lift, etc.) Pumping | |
| Length of Test 24 hours | Tubing Pressure 50 | Casing Pressure 50 | Choke Size N/A |
| Actual Prod. During Test | Oil - Bbls. 165 | Water - Bbls. 89 | Gas - MCF 70 |

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 June 2, 1992 Title (915)682-6822
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 19 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.