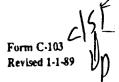
Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department



JUN 1 5 1994

- DATE

OIL CONSERVATION DIVISION DISTRICT I WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30-015-27100 Santa Fe, New Mexico 87504-2088 DISTRICT II 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 STATE FEE MAY 23. '94 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 V - 3772O C. D. SUNDRY NOTICES AND REPORTS ON WELLASTESIA, OFFICE (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: BR 15 State OIL WELL OTHER 8. Well No. Name of Operator Pogo Producing Company 9. Pool name or Wildcat Address of Operator Wildcat Delaware P.O. Box 10340, Midland, Texas 79702-7340 915-682-6822 Well Location South 1650 Feet From The Line and _ Feet From The Line Unit Letter . Eddy 24 South Range 27 East NMPM County Township Section 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3197.0 GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: ALTERING CASING REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ABANDON PLUG AND ABANDONMENT COMMENCE DRILLING OPNS. **CHANGE PLANS** TEMPORARILY ABANDON CASING TEST AND CEMENT JOB PULL OR ALTER CASING Plug Back OTHER: OTHER: 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103. PLUG BACK - 10/26/92 Set CIBP @ 5,156'. Perf 5-1/2'' csg. 5,096'-5,130' (34'-68 holes). Acidize with 1,500 gals 15% NEFE with Pentol. Frac with 10,000 gals 35# Linear prepad and 30,000 gals 35#X-Linked Pad. Propped with 31,880# 16/30 Ottawa Sand mixed in 35# Linear Gel. I hereby certify that the information above is true and complete to the best of my knowledge and belief. TIME Division Operations Manager DATE Jan. 15, 1993 SIGNATURE TELEPHONE NO. 915-682-6Richard L. Wright TYPE OR PRINT NAME (This space for State Use)

SUPERVISOR, DISTRICT II

APPROVED BY

MANDITIONS OF APPROVAL, IF ANY: