

OIL CONSERVATION DIVISION

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

RECEIVED

JUL 15 1993

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Pogo Producing Company		Well API No. 30-015-27218
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"/>

CONFIDENTIAL

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Pure Gold "D" Federal	Well No. 7	Pool Name, Including Formation Sand Dunes, Delaware	Kind of Lease State/Federal or Fee	Lease No. NM-40659
Location Unit Letter K : 1980' Feet From The South Line and 1650' Feet From The West Line Section 28 Township 23 South Range 31 East, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil EOTT Energy Corp.	<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 Llano	<input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 921 W. Sanger, Hobbs, New Mexico 88240				
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 28	Twp. 23S	Rge. 31E	Is gas actually connected? Yes	When? July 13, 1993

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 06/18/93	Date Compl. Ready to Prod. 07/08/93		Total Depth 8080'		P.B.T.D. 8037'			
Elevations (DF, RKB, RT, GR, etc.) 3355.7' FR	Name of Producing Formation Brushy Canyon		Top Oil/Gas Pay 7864'		Tubing Depth 7792'			
Perforations 7864'-7924' (60 - .50 Dia holes)					Depth Casing Shoe 8080'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		574'		725 sx-Circ 150 sx			
11"	8-5/8"		4023'		1600 sx-Circ 200 sx			
7-7/8"	5-1/2"		8080'		1545 sx-Circ 302 sx			

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 07/09/93	Date of Test 07/13/93	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 700 psi	Casing Pressure 1120 psi	Choke Size 18/64"
Actual Prod. During Test	Oil - Bbls. 407	Water - Bbls. 69	Gas - MCF 479

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 Barrett L. Smith Sr. Oper. Engineer
Printed Name July 14, 1993 Title (915)682-6822
Date _____ Telephone No. _____

OIL CONSERVATION DIVISION

Date Approved JUL 26 1993

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.