

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

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

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

WELL API NO. 30-015-29987
Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
State Oil & Gas Lease No.
Lease Name or Unit Agreement Name Harroun 15
Well No. 7
Pool name or Wildcat Pierce Crossing Delaware, E.

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS.)

Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER

Name of Operator
Pogo Producing Company

CONFIDENTIAL

Address of Operator
P. O. Box 10340, Midland, TX 79702-7340

Well Location
Unit Letter C : 330 Feet From The North Line and 1980 Feet From The West Line
Section 15 Township 24S Range 29E NMPM Eddy County
Elevation (Show whether DF, RKB, RT, GR, etc.)
2939' GR

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ANBANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

06/26/98 Set CIBP @ 6600'. Perf Delaware 6260'-64' (8 - .38" dia holes), 6274'-86' (24 - .38" dia holes), 6338'-48' (20 - .38" dia holes).

06/27/98 Acdz w/ 1500 gals 7-1/2% HCL. Swab test.

06/28/98 Set RBP @ 6000'. Perf Delaware 5740'-46' (12 - .38" dia holes).

07/01/98 Acdz perfs 5740'-46' w/ 1000 gals 7-1/2% HCL. Swab test.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Barrett L. Smith TITLE Division Operations Engineer DATE 07-22-98

TYPE OR PRINT NAME Barrett L. Smith

TELEPHONE NO. 915-685-8100

(This space for State Use)

APPROVED BY Jim W. Green BLS TITLE District Supervisor DATE 7-24-98

CONDITIONS OF APPROVAL, IF ANY: