

Submit to Appropriate  
District Office  
State Lease - 6 copies  
Fee Lease - 5 copies

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-101  
Revised 1-1-89

ckr  
burn  
50  
OP

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

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

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

OIL CONSERVATION DIVISION

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

SEP 30 1993

API NO. (assigned by OCD on New Wells)

30-015-27698

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

V-3866

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☒

RE-ENTER ☐

DEEPEN ☐

PLUG BACK ☐

b. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER ☐

SINGLE  
ZONE ☒

MULTIPLE  
ZONE ☐

7. Lease Name or Unit Agreement Name

COTTONWOOD 2 STATE

2. Name of Operator

POGO PRODUCING COMPANY

8. Well No.

1

3. Address of Operator

P. O. BOX 10340, MIDLAND, TEXAS 79702

9. Pool name or Wildcat

UNDESIGNATED DELAWARE

4. Well Location

Unit Letter B : 660 Feet From The NORTH Line and 1980 Feet From The EAST Line

Section 2 Township 26 SOUTH Range 26 EAST NMPM EDDY County

10. Proposed Depth

6000

11. Formation

DELAWARE

12. Rotary or C.T.

ROTARY

13. Elevations (Show whether DF, RT, GR, etc.)

3370.4' GR

14. Kind & Status Plug Bond

BLANKET

15. Drilling Contractor

TO BE SELECTED

16. Approx. Date Work will start

UPON APPROVAL

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17-1/2"	13-3/8"	54.5#	300'	150	SURFACE
11"	8-5/8"	24#	1850'	300	SURFACE
7-7/8"	5-1/2"	15.5#	6000	600	SURFACE

THIS PROPOSED WELL IS A DELAWARE TEST.

A 3000 PSI WORKING PRESSURE, DOUBLE RAM TYPE PREVENTER,  
WITH PIPE AND BLIND RAMS, WILL BE IN USE WHILE DRILLING  
BELOW THE SURFACE CASING.

A BOP SKETCH IS ATTACHED.

10-8-93  
10-9-93

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE

Richard L. Wright

TITLE

Division Operations Mgr.

DATE

Sept. 29, 1993

TYPE OR PRINT NAME

915-682-6822

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

APPROVED BY

SUPERVISOR, DISTRICT II

TITLE

DATE

OCT 7 1993

CONDITIONS OF APPROVAL, IF ANY:

APPROVAL VALID FOR 30 DAYS  
PERMIT EXPIRES 11-6-93  
ON WELL DRILLING UNDERWAY

OIL CONSERVATION DIVISION

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

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

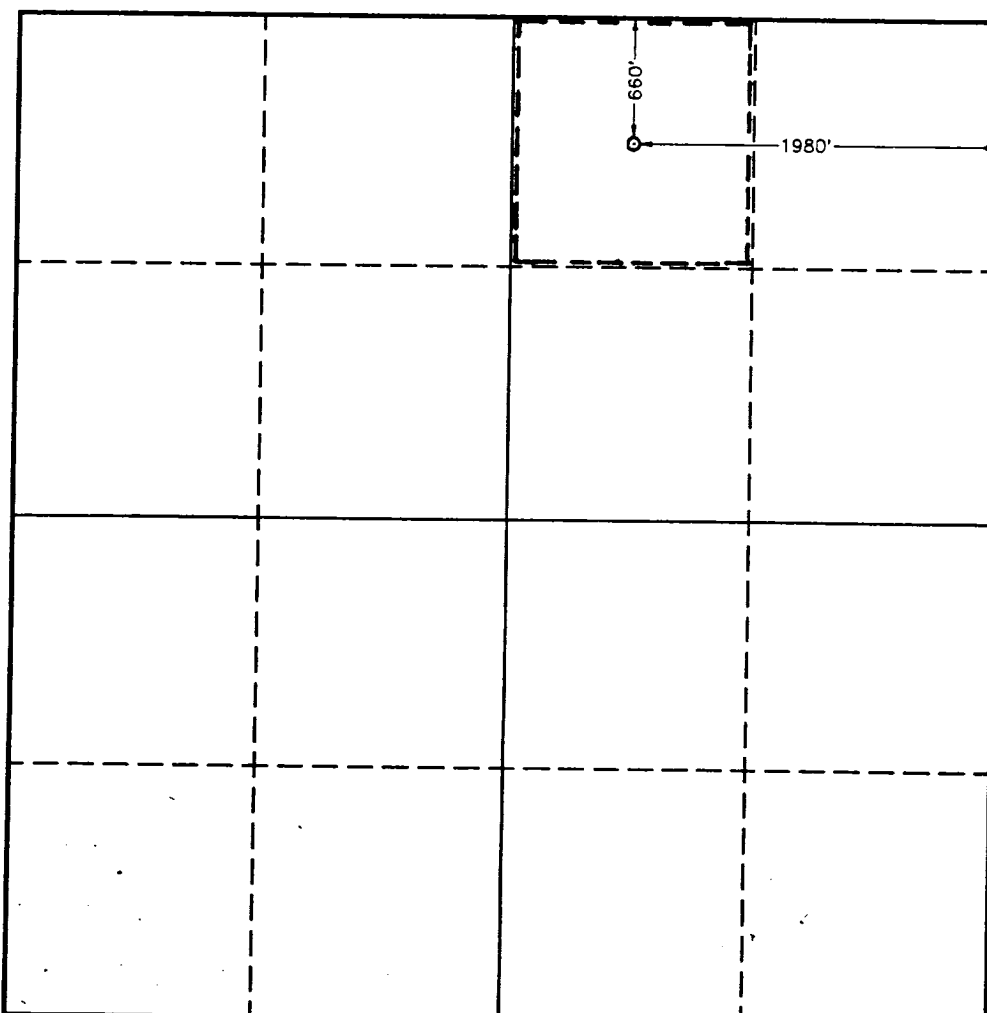
All Distances must be from the outer boundaries of the section

Operator POGO PRODUCING COMPANY			Lease COTTONWOOD 2 STATE		Well No. 1
Unit Letter B	Section 2	Township 26 SOUTH	Range 26 EAST	County EDDY	
Actual Footage Location of Well: 660 feet from the NORTH line and 1980 feet from the EAST line					
Ground Level Elev. 3370.4'	Producing Formation DELAWARE		Pool UNDESIGNATED DELAWARE		Dedicated Acreage: 40 Acres

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?  
☐ Yes ☐ No If answer is "yes" type of consolidation \_\_\_\_\_

If answer is "no" list of owners and tract descriptions which have actually been consolidated. (Use reverse side of this form necessary.)

No allowable will be assigned to the well unit all interests have been consolidated (by communitization, unitization, forced-pooling, otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature

Printed Name

Richard L. Wright

Position

Division Operations Supr.

Company

POGO PRODUCING COMPANY

Date

September 29, 1993

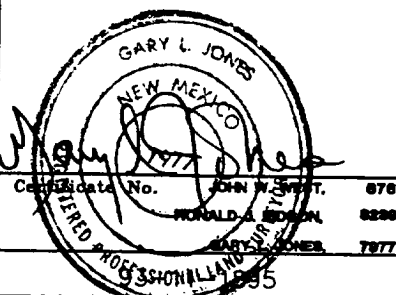
SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

SEPTEMBER 28, 1993

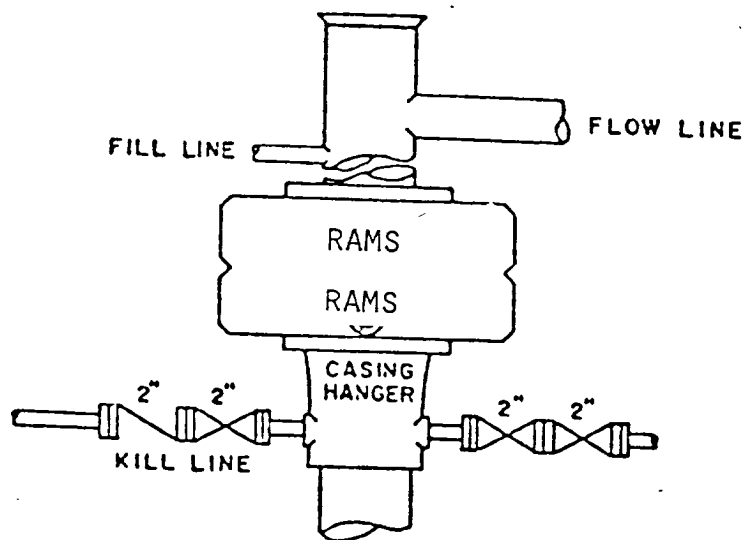
Signature & Seal of  
Professional Surveyor



Certificate No. 678

1977

1993



BOP STACK

3000 PSI WORKING PRESSURE

BOP ARRANGEMENT