

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

47271 +
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
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.	30-015-26930
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"/> Casinghead Gas
Change in Operator	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator			

II. DESCRIPTION OF WELL AND LEASE

Lease Name	DiMaggio	Well No.	1	Pool Name, Including Formation	Undesignated, Delaware	Kind of Lease	State, Federal or Fee	Lease No.	LH-1800
Location	Unit Letter J : 1650 Feet From The South Line and 1693 Feet From The East Line								
Section	16	Township	26 South	Range	29 East	NMPM	Eddy	County	

EOTT Energy Operating LP

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	<input checked="" type="checkbox"/> or Condensate	Address (Give address to which approved copy of this form is to be sent)
Enron Oil Trading	EOTT Energy Corp.	P.O. Box 1188, Houston Texas 77252
Name of Authorized Transporter of Casinghead Gas	Effective 1-1-93	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit J Sec. 16 Twp. 26S Rge. 29E	Is gas actually connected? No
		When ? Requesting Flare Permit

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	02-05-92	Date Compl. Ready to Prod.	03-01-92	Total Depth	7,000'	P.B.T.D.	5,443'	
Elevations (DF, RKB, RT, GR, etc.)		Name of Producing Formation	Delaware, Cherry	Top Oil/Gas Pay	4,996'	Tubing Depth	4,953'	
Perforations	4,996'-5,016' 2 spf			Depth Casing Shoe	5,531'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2"	13-3/8"	480'	600 sx-Circ 256					
11"	8-5/8"	2816'	1150 sx-Circ 240					
7-7/8"	5-1/2"	5531'	955 sx-TOC 4060'					
	2-7/8"	4953'						

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	03-01-92	Date of Test	03-09-92	Producing Method (Flow, pump, gas lift, etc.)	Pumping
Length of Test	24 hours	Tubing Pressure	N/A	Casing Pressure	20
Actual Prod. During Test		Oil - Bbls.	15	Water - Bbls.	79
				Choke Size	N/A
				Gas - MCF	18

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 March 26, 1992 Title (915) 682-6822
Date March 26, 1992 Telephone No. (915) 682-6822

OIL CONSERVATION DIVISION

Date Approved APR 27 1992
By ORIGINAL SIGNED BY
MINE 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.