

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil C s. Di 110.
1st

10-2834

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Pogo Producing Company

3. Address and Telephone No.

P. O. Box 10340, Midland, TX 79702-7340 (915) 682-6822

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

660' FNL & 330' FWL, Section 13, T24S, R30E

5. Lease Designation and Serial No.

NM-89162 NM-82896

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Nimitz 13 Federal #1

9. API Well No.

30-015-29892

10. Field and Pool, or Exploratory Area

Wildcat Delaware

11. County or Parish, State

Eddy County, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

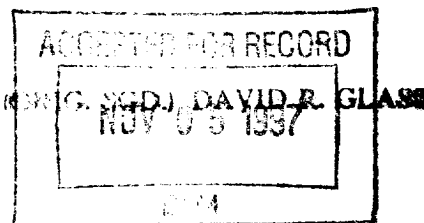
TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Spud, Set Surface Csg
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Spud & Set Surface Csg - MIRU Lakota #7. Spud well @ 1430 hrs CST 10/27/97. Drilled 17-1/2" hole to 624'. TD reached @ 0645 hrs CST 10/28/97. Ran 14 jts 13-3/8" 54.5# J-55 ST&C csg. Cmt'd w/ 540 sxs "C" Lite w/ 2% CaCl₂ 12.4 ppg. Tailed w/ 200 sxs "C" w/ 2% CaCl₂ 14.8 ppg. Plug down @ 1230 hrs CST 10/28/97. Recovered 200 sxs excess cmt. Total WOC 17-1/2 hrs. Test BOP's to 1000#.



14. I hereby certify that the foregoing is true and correct

Signed David R. Glass

Title Senior Operations Engineer

Date 10/30/97

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____

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DIVISION
ROSWELL OFFICE