Form 3160-5 (April 2004)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM AFOM B No.	PROVE 1004-013	EC	El	٧	E	0
Frommer M	auch 21 200	7				

DONDRO OF EARLY MINITODIMENT						
Vacinio	MOTICES	AND	REPORTS	ΟN	WEN	2

Expires: March 31, 2007

5. Lease Serial No. OCT 0 5 2005

Sundry notices and reports on wells				
r to re-enter an	6. If Indian, Allottee or Tribe NWIDLAND			
such proposals.	EB 27 PM 1 43			
on reverse side.	7. If Unit or CA/Agreement, Name and/or No.			
	RECEIVED			
1. Type of Well Gas Well Other				
	Bilbo #14 9. APIWell No.			
Pogo Producing Company				
3a Address 3b. Phone No. (include area code) 432-685-8100 432-685-8100				
	10. Field and Pool, or Exploratory Area Basin Fruitland Coal			
שב וים	11. County or Parish, State			
950 FSL & 2435' FEL, Section 14, T26N, R13W				
NATION OF MOUSE DE	San Juan, NM			
	PORT, OR OTHER DATA			
TYPE OF ACTION				
Production (Star	t/Resume) Water Shut-Off			
	Well Integrity			
	xx Other <u>change of</u>			
· · · · · · · · · · · · · · · · · · ·	ndon <u>operator</u>			
k Water Disposal	well name-			
o change the name of	f the above centioned well			
o change the hame of	the above caphoned wen			
)				
	cc:OCD			
1				
Tide Sr Eng	Tech			
Dr. mig				
Date 09/21/05	ACCEPTED FOR RECOR			
L OR STATE OFFICE (	USE as 0.0 act			
	Str 2 7 ZUD			
Title	Date			
. 1	FARMING TON ON THE CT OFFICE			
Office	SVW			
y person knowingly and willfully to	make to any department or agency of the United			
	No. (include area code) 85-8100  R1 3W  E NATURE OF NOTICE, RE TYPE OF ACTION Production (Star Reclamation Instruction Recomplete Abandon Temporarily Aback Water Disposal Including estimated starting date of any face locations and measured and true No. on file with BLMBIA. Require ultiple completion or recompletion in ar all requirements, including reclama to change the name of			

States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)