

Submit Copy To Appropriate District Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

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.)		WELL API NO. 30-015-29349
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other INJECTION		5. Indicate Type of Lease STATE <input type="checkbox"/> FED <input checked="" type="checkbox"/>
2. Name of Operator Pogo Oil and Gas Operating Inc		6. State Oil & Gas Lease No.
3. Address of Operator 2130 W. Bender Blvd, Hobbs, NM 88240		7. Lease Name or Unit Agreement Name H E West B
4. Well Location Unit Letter <u>B</u> : <u>440</u> feet from the <u>North</u> line and <u>1980</u> feet from the <u>East</u> line Section <u>10</u> Township <u>17S</u> Range <u>31E</u> NMPM County <u>Eddy</u>		8. Well Number <u>#094</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 372000
		10. Pool name or Wildcat Grayburg Jackson: SR-Q-G-SA

12. 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 ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:  
REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
OTHER: MIT ☒

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Performed MIT for 5 year pressure test @ 590psi  
Well Passed  
Attached is copy of MIT Chart

RECEIVED

DEC 17 2018

DISTRICT II-ARTESIA O.C.D.

Spud Date:

Rig Release Date:

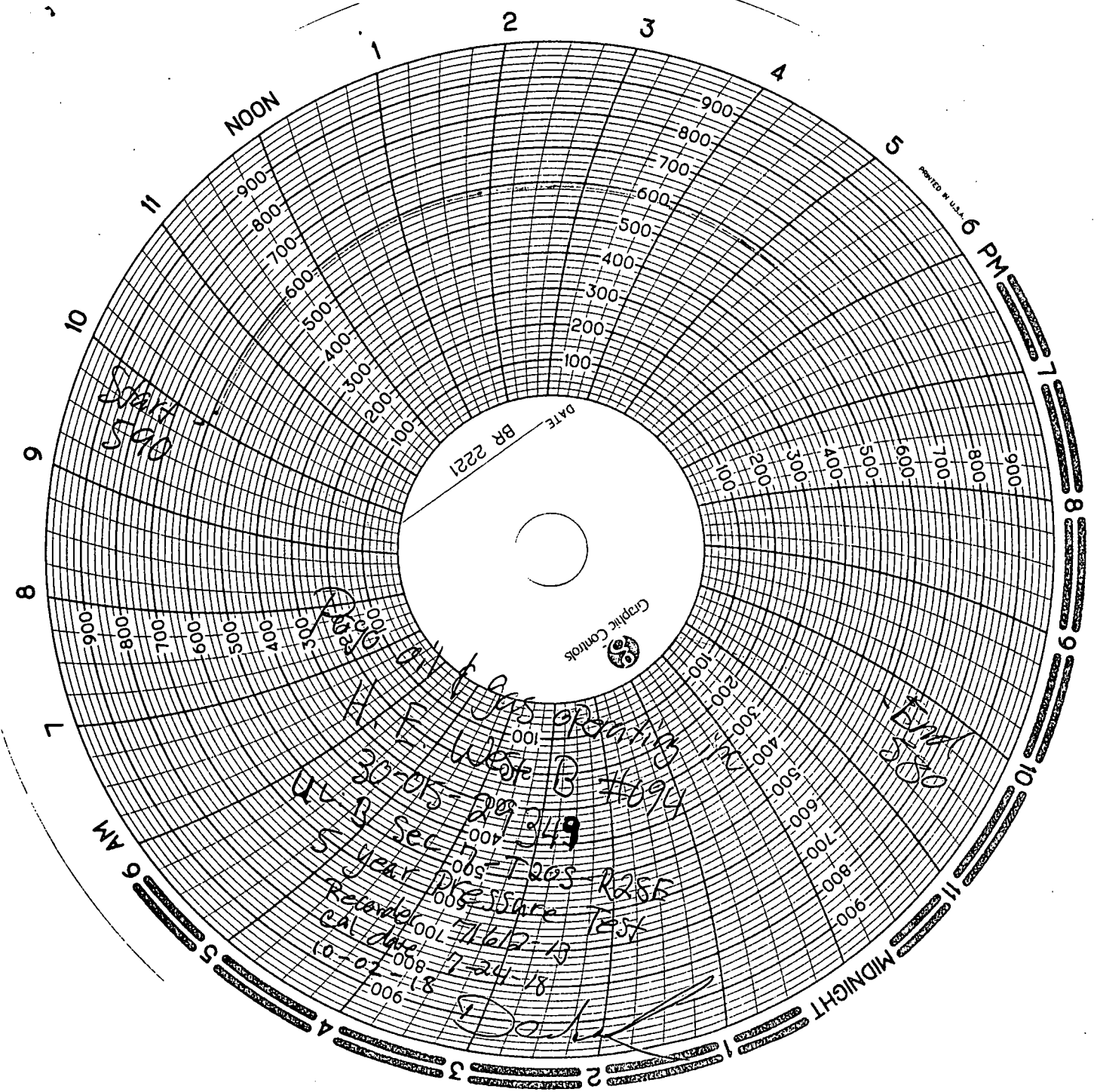
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE [Signature] TITLE Product Manager DATE 12/14/18

Type or print name \_\_\_\_\_ E-mail address: \_\_\_\_\_ PHONE: \_\_\_\_\_

For State Use Only

APPROVED BY: [Signature] TITLE Compliance Officer DATE 12-17-18  
Conditions of Approval (if any):



590

12

W F 1945  
4-30-05-20  
B 4899  
Sec 7  
year 1945  
Relaxer 1945  
CAL 1945  
10-01-18

DATE  
BR 2221

Graphic Controls