

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

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

5. Lease Designation and Serial No.  
NM-88954

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
NEL Federal #9

9. API Well No.  
30-015-27327

10. Field and Pool, or Exploratory Area  
Loving Delaware East

11. County or Parish, State  
Eddy County, NM

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

RECEIVED

1. Type of Well  
☐ Oil Well ☐ Gas Well ☒ Other

MAR 30 2005

OCD-ARTESIA

2. Name of Operator  
Pogo Producing Company

3. Address and Telephone No.

P. O. Box 10340, Midland, TX 79702-7340 432-685-8100

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

1980' FNL & 1650' FEL, Section 9, T23S, R28E

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

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other Request TA status	<input type="checkbox"/> 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.)\*

Pogo Producing Company respectfully request TA status for the above captioned well. A MIT was run on 05/05/04. See attached chart.

TA APPROVED FOR 6 MONTH PERIOD  
ENDING 9/28/05

\* By ending date, either put well on production or submit a plugging procedure

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

Signed

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

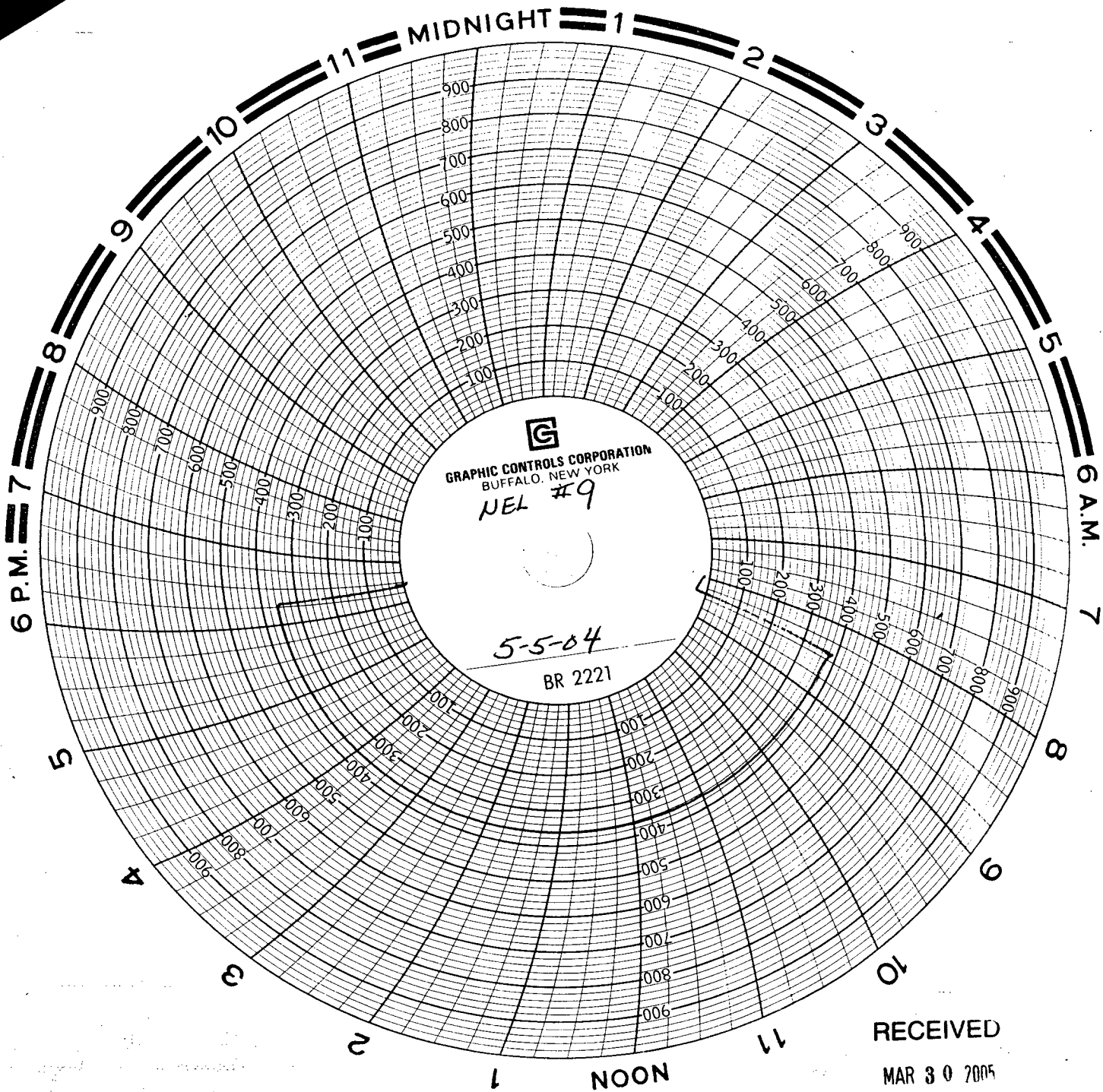
Sr. Operation Tech

Date 05/20/04

Title

Petroleum Engineer

Date MAR 28 2005



RECEIVED  
MAR 30 2005  
OOD-ARTS-11