

Submit 1 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

WELL API NO.  
30-015-31432

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

STATE W

8. Well Number 2

9. OGRID Number 246289

10. Pool name or Wildcat  
CARLSBAD; MORROW, SOUTH

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.)

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

2. Name of Operator RKI EXPLORATION & PRODUCTION

3. Address of Operator 210 PARK AVE., SUITE 900, OKLAHOMA CITY, OK 731012

4. Well Location

Unit Letter M : 660 feet from the SOUTH line and 660 feet from the WEST line  
Section 3 Township 23S Range 26E NMPM County EDDY

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3,311' GR

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: ☐

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.

RKI Exploration and Production requests to temporarily abandon this well while it is being evaluated for possible future use.

Perfs at 10,412' - 10,522'

CIBP at 10,220'

PBTD at 10,220'

TD at 12,000'

When TA status is approved, RKI will notify the OCD 24 hours in advance of mechanical integrity testing.

RECEIVED

JAN 14 2014

NMOCD ARTESIA

Perfs 11648-11678 3/01  
CIBP 11,450 1/05  
Perfs @ 10,506-10,522/10412  
Perf @ 10,308

Spud Date: 12/18/2000

Rig Release Date: 2/8/2001

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

SIGNATURE Jody Noerdlinger TITLE Regulatory Analyst

DATE 1/10/2014

Type or print name Jody Noerdlinger

E-mail address: jnoerdlinger@rkixp.com

PHONE: 405-996-5774

For State Use Only

APPROVED BY: [Signature]

TITLE Dr. P. Spowis

DATE 3/17/2014

Conditions of Approval (if any):

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. Francis Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

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

Form C-103  
May 27, 2004

WELL API NO. 30-015-31432
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name State "W"
8. Well Number 2
9. OGRID Number 017891
10. Pool name or Wildcat Undes Frontier Hills; Strawn

SUNDY 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)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator Pogo Producing Company	
3. Address of Operator P. O. Box 10340, Midland, TX 79702-7340	
4. Well Location Unit Letter <u>M</u> : <u>660</u> feet from the <u>South</u> line and <u>660</u> feet from the <u>West</u> line Section <u>3</u> Township <u>23S</u> Range <u>26E</u> NMPM Eddy County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3312	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Temporarily Abandon <input checked="" type="checkbox"/>	

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

07/11/07 CIBP set @ 10,220'.  
-07/12/07 Test csg to 550 psi for 30 mins. Well Temporarily Abandoned.  
Original chart was lost in the mail. See copy of chart attached.

File  
Copy

Temporarily Abandoned Status approved

9/19/2009

Refer to ACOI-121

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Cathy Wright TITLE Sr. Eng Tech DATE 09/12/07

Type or print name Cathy Wright E-mail address: wrightc@pogoproducing.com Telephone No. 432-685-8100

For State Use Only

APPROVED BY: Richard Inge TITLE Compliance Officer DATE 9/19/07  
Conditions of Approval (if any):

May 27, 2004

Office

District I

1625 N. French Dr., Hobbs, NM 88240

District II

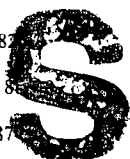
1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87412

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505



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

WELL API NO.

30-015-31432

Indicate Type of Lease

STATE ☒FEE ☐

6. State/Oil &amp; Gas Lease No.

7. Lease Name or Unit Agreement Name

State "W"

8. Well Number 2

9. OGRID Number

017891

10. Pool name or Wildcat

Undes Frontier Hills; Strawn

## 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.)

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

2. Name of Operator

Pogo Producing Company

3. Address of Operator

P. O. Box 10340, Midland, TX 79702-7340

4. Well Location

Unit Letter M : 660 feet from the South line and 660 feet from the West line

Section 3 Township 23S Range 26E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

3312

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

## 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 ☐OTHER: ☐

### SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐ P AND A ☐CASING/CEMENT JOB ☐OTHER: ☐

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Pogo Producing Company respectfully request TA status for the above captioned well. A CIBP will be set @ 10,250' and an integrity test run as soon as TA status is approved.

File

Copy

Notify OCD 24 hrs. prior to **Test**  
~~Any work done.~~

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Cathy Wright TITLE Sr. Eng Tech DATE 05/16/07Type or print name Cathy Wright E-mail address: wrightc@pogoproducing.com Telephone No. 432-685-8100

For State Use Only

APPROVED BY: Benny Guy TITLE Gary Guye Deputy Field Inspector District II - Artesia DATE JUN 1 2007

Conditions of Approval (if any):

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
March 4, 2004

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

WELL API NO. 30-015-31432
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name State "W"
8. Well Number 2
9. OGRID Number 017891
10. Pool name or Wildcat Undes Frontier Hills; Strawn

**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.)

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

2. Name of Operator  
Pogo Producing Company

3. Address of Operator  
P. O. Box 10340, Midland, TX 79702-7340

RECEIVED  
JAN 19 2006  
OCD-ARTESIA

4. Well Location  
Unit Letter M : 660 feet from the South line and 660 feet from the West line  
Section 3 Township 23S Range 26E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3312

Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached)

Pit Location: UL Sect Twp Rng Pit type Depth to Groundwater Distance from nearest fresh water well

Distance from nearest surface water Below-grade Tank Location UL Sect Twp Rng ;  
feet from the line and feet from the line

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/> File <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: Copy <input type="checkbox"/>

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Pogo Producing Company request TA status for the above captioned well. A CIBP will be set @ 10,250 and an integrity test run as soon as TA status is approved.

11,548'

Notify OCD 24 hours prior to test. 748-1283

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Cathy Wright TITLE Sr Eng Tech DATE 1/11/06  
Type or print name Cathy Wright E-mail address: wrightc@pogoproducing.com Telephone No. 432-685-8100

(This space for State use)

APPROVED BY [Signature] TITLE  DATE 1-19-06  
Conditions of approval, if any:

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 Conditions of approval, if any: \_\_\_\_\_