

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
May 27, 2004

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

WELL API NO. 30-015-34444
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 H. BUCK STATE
8. Well Number 4
9. OGRID Number 017891
10. Pool name or Wildcat PIERCE CROSSING BONE SPRING E.

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>
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>H</u> : <u>2310</u> feet from the <u>NORTH</u> line and <u>330</u> feet from the <u>EAST</u> Section <u>16</u> Township <u>24S</u> Range <u>29E</u> NMPM EDD <u>OC-ARTESIA</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2927'

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	P AND A <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>
MULTIPLE COMPL <input type="checkbox"/>	OTHER: <input type="checkbox"/>
OTHER: <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.

Spud & Set Surface Csg – MIRU Patterson #78. Spud well @ 07:00 hrs 11/29/05. Drld 17-1/2" hole to 254'. TD reached @ 14:15 hrs 11/29/05. Ran 6 jts 13-3/8" 48# H-40 ST&C csg. Cmt'd w/ 350 sks Cl C + 2% CaCl2 @ 14.8 ppg. Plug down @ 19:00 hrs 11/29/05. Circ 140 sks to surface. WOC 20-1/2 hrs. Make cut-off. Install WH. NU BOP's & test to 1000#. Test csg to 1000# for 30 mins ok.

Intermediate Csg – Drld 12-1/4" hole to 2104'. Set 231 sks Cl "C" + 2% CaCl2 @ 14.8 ppg. Started drilling w/ MWD to 2830'. TD reached @ 23:15 hrs 12/08/05. Ran 64 jts 9-5/8" 36# J-55 LT&C csg. Cmt'd w/ 700 sks 35:65 @ 12.4 ppg followed by 200 sks Cl C + 2% CaCl2 @ 14.8 ppg. Circ 292 sks to surface. Plug down @ 14:00 hrs 12/09/05. WOC 24 hrs. Make cut-off. Install WH. NU BOP's & test to 3000#. Test csg to 1500# for 30 mins ok.

TD & Prod Csg – Drld 8-1/2" – 7-7/8" hole to 7225'. TD reached @ 04:30 hrs 12/23/05. Logged well w/ Halliburton. Cont drilling 8-1/2" – 7-7/8" hole w/ MWD surveys to 10,686'. TD reached @ 20:00 hrs 01/10/06. Ran 259 jts 5-1/2" 17# N-80 LT&C & BT&C csg. Cmt'd w/ 2050 sks Cl C + add @ 14.09 ppg. ND BOP's. NU tbh head & test to 3000#. Ran CBL 02/08/06. TOC @ 1920'. Press up on csg to 5000#.

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. Engineering Tech DATE 02/27/06

Type or print name CATHY WRIGHT E-mail address: wrightc@pogoproducingcom Telephone No. 432-685-8100

For State Use Only

FOR RECORDS ONLY

APPROVED BY: _____ TITLE _____ DATE MAR 10 2006

Conditions of Approval (if any):