Form 3160-5

UNITED STATES

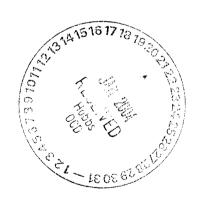
N.M. Oil Cons. Division 1625 N. French Dr.

FORM APPROVED

| | NT OF THE INTERIOR FIODOS, INIVI 00240 | Budget Bureau No. 1004-0135 Expires: March 31, 1993 |
|---|---|---|
| | LAND MANAGEMENT | 5. Lease Designation and Serial No. NM-2379 |
| Do not use this form for proposals to dri | AND REPORTS ON WELLS ill or to deepen or reentry to a different reservoir. DR PERMIT-" for such proposals | 6. If Indian, Allottee or Tribe Name |
| SUBMIT IN TRIPLICATE | | 7. If Unit or CA, Agreement Designation |
| 1. Type of Well Oil Well Well Other 2. Name of Operator | | 8. Well Name and No. Covington A Federal #18 |
| Pogo Producing Company 3. Address and Telephone No. | | 9. API Well No. 30-025-32037 |
| P. 0. Box 10340, Midland, TX 79702-7340 432-685-8100 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) | | 10. Field and Pool, or Exploratory Area Red Tank Delaware West |
| 330' FNL & 1980' FEL, Section 26, T22S, R32E | | 11. County or Parish, State Lea County, NM |
| 12. CHECK APPROPRIATE BOX(s |) TO INDICATE NATURE OF NOTICE, REPORT, C | R OTHER DATA |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| ☐ Notice of Intent | ☐ Abandonment ☐ Recompletion | ☐ Change of Plans ☐ New Construction |
| Subsequent Report | ☐ Plugging Back ☐ Casing Repair ☐ Attering Casing | Non-Routine Fracturing Water Shut-Off Conversion to Injection |
| | X other Release RBP | 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 pertinet 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 markders and zones pertinent to this work.)*

01/01/04 POH w/ rods, pump and tbg. 01/02/04 Latch & release RBP @ 8358'. 01/03/04 Return well to production.



| 14. I hereby centify that the foregoing is true and correct Signed Control Control | Title Sr. Operation Tech | Date 01/13/04 |
|--|--|---|
| (This space for Federal of State office (use) | | |
| Approved by DO Conditions of approval-if-any-) DAVID T. CLASS | Title | Date |
| JAN 16 2004 | • | |
| TH. 40 1/2 0 0 1/2 1001 | | |
| Title 18 U.S.C. Section 1001, makes it a crime for any person knowin statements or representations as to any matter within its jurisdiction. | gly and willfully to make to any department or agend | cy of the United States any false, fictitious or fraudulent |
| DESCRIPTION AND STREET | | |

