Submit 3 Copies To Appropriate District	State of N	New Mexico		Form C-103		
Office District I	Energy, Minerals a	and Natural Resources			May 27, 2004	
1625 N. French Dr., Hobbs, NM 88240				WELL API NO.		
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERV		30-025-23602			
District III	1220 South		5. Indicate Type of Lease			
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe	STATE				
District IV 1220 S. St. Francis Dr., Santa Fe, NM	Santa 1 C	, 14141 67505	6. State Oil & G	as Lease No.		
87505						
	CES AND REPORTS ON		7. Lease Name of	or Unit Agree	ment Name	
(DO NOT USE THIS FORM FOR PROPOS DIFFERENT RESERVOIR. USE "APPLIC					}	
PROPOSALS.)			MONSANTO S			
 Type of Well: Oil Well ☐ Gas Well ☐ Other INJECTION 			8. Well Number		:	
2. Name of Operator			9. OGRID Num	8 her		
POGO PRODUCING COMPANY				017891		
3. Address of Operator				10. Pool name or Wildcat		
P. O. BOX 10340, MIDLAND, TX 79702-7340				PADUCA DELAWARE		
4. Well Location						
Unit Letter L :	1660 feet from the	SOUTH line an	d <u>990</u> feet f	rom the W	EST line	
Section 16	Township		32E NMPM		County	
Section 10	11. Elevation (Show wh				La Sala	
	3414' GR	emer DN, MD, K1, OK	, e.c.,	ET Project		
Pit or Below-grade Tank Application 🗌 o				and the state of t		
Pit type Depth to Groundwa	iterDistance from near	rest fresh water well	_ Distance from nearest sui	face water	•	
Pit Liner Thickness: mil	Below-Grade Tank: Vol		- ; Construction Material			
			·	5		
12. Check A	Appropriate Box to Inc	licate Nature of Not	ice, Report or Othe	r Data		
TEMPORARILY ABANDON DULL OR ALTER CASING DULL OR ALTER CASING DULL TO BE OF THE PROPERTY OF TH	CHANGE PLANS MULTIPLE COMPL	☐ CASING/CE	E DRILLING OPNS. MENT JOB	P AND A		
OTHER: RETURN WELL TO PRO 13. Describe proposed or comp		OTHER:	s and give pertinent de	tes including	estimated data	
of starting any proposed wo or recompletion.						
Subject and the second section last.			L	10 1.	NT-41-	
Subject well has a casing leak. Pogo	will prepare an ArE to re	epair and it unsuccessiu	i wili P&A well per app	rovea Sunary	/ Notice.	
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				1 3	Children on	
				3	c ,	
				1:4	Jan Company	
				//_	V . 2	
				13.	· .	
hereby certify that the information	above is true and complete	e to the best of my know	vledge and belief I furt	her certify that	an Virtuer der liebe	
rade tank has been/will be constructed or	closed according to NMOCD g	uidelines , a general peri	nit 🔲 or an (attached) alter	native OCD-ap	proved plan .	
IGNATURE CASH /	11,014	TITLE SR ENG TE		DATE	03/20/06	
7	0					
ype or print name CATHY WR	IGHT E-mail address:	wrightc@pogoproduci	ng.com Telephone N	lo. 432-68 9/	100 3 200c	
For State Use Only	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			•	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
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Conditions of Approval (if any):		TPEDICI NESEIVIATIV	E II/SIAFF MANAGE			