Form 3160-5 (April 2004)

#### **UNITED STATES** DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

OCD-HOBBS

FORM APPROVED OM B No. 1004-0137 Expires: March 31, 2007

|         | Expires:   | March | 31 |
|---------|------------|-------|----|
| Lease S | Serial No. |       |    |
|         |            |       |    |

| SUNDRY  | NOTICES AND REF  | PORTS ON WI   | ELLS                 | בו פסטו –ויווו                                  | ,                 |                      |             |
|---|--|---|----------------------|---|-------------------|----------------------|-------------|
|   |  |   | 6. If Indian, A      | 6. If Indian, Allottee or Tribe Name            |                   |                      |             |
| SUBMIT IN TRIPLICATE- Other instructions on reverse side.  7. If              |  |   |                      | 7. If Unit or CA/Agreement, Name and/or No.     |                   |                      |             |
| 1. Type of Well Gas Well Other 8.   |  |   |                      | 0 337 1131                                      | 131               |                      | _           |
| Da  |  |   |                      | 3. Well Name and No.<br>Proximity 30 Federal #3 |                   |                      |             |
| Name of Operator     Pogo F   | roducing Company   |   |                      | 9. API Well 1                                   |                   | 01 #2                |             |
|   |  |   |                      | 30-025-37                                       |                   |                      |             |
| <u> </u>  |  |   | 10. Field and Po     |   | ory Area          | _                    |             |
| 4. Location of Well (Footage, Sec.,   |  | ,   |                      | Livingsto                                       | n Ridge I         | Delaware E           | ast         |
| 1980' FNL & 1980' FWL,  | Section 30, T22S, R  | 32E   |                      | 11. County or I<br>Lea Count                    | ŕ                 |                      |             |
| 12. CHECK A   | PPROPRIATE BOX(ES) TO  | INDICATE NATU   | RE OF NOTICE, RI     | EPORT, OR O                                     | THER DAT          | A                    |             |
| TYPE OF SUBMISSION  |  | TY  | PE OF ACTION         |   |                   |                      | <del></del> |
|   | Acidize  | Deepen  | Production (Star     | rt/Resume)                                      | Water Shut-0      | Off                  | _           |
| Notice of Intent  | Alter Casing   | Fracture Treat  | Reclamation          | Ĺ   | Well Integrit     |                      |             |
|   | Casing Repair  | New Construction  | Recomplete           |   | Other             | ,                    |             |
| -   | Change Plans   | Plug and Abandon  | Temporarily Ab       | andon   |                   |                      |             |
| Final Abandonment Notice  | Convert to Injection   | Plug Back   |                      |   |                   |                      |             |
| <ul><li>B. Name of Fac</li><li>C. Type of Fac</li><li>D. Loction: N</li></ul> | as producing water on the duced from all formation on lease. 2 (500 bbl) Stop the disposal facility. | s in barrels per of<br>the Carlos and 1<br>Via polyline<br>ucing Company<br>eral #4 | lay. <u>105 BWPD</u> | 'ank  | DO NOT LAND HOUT. | 200h SEP = 5 D 3: 59 | On boy En   |
| 7. See attached.  14. Thereby certify that the fore                           | egoing is true and correct   |   |                      |   |                   |                      | =           |
| Name (Printed/Typed) Cathy Wright   |  | Title   | Sr. Eng Tec          | h   |                   |                      | _           |
| Signature Colf  | Mught  | Date  | 08/31/               |   | PEDTE             | 1                    |             |
|   | THIS SOACE FOR   | FEDERAL OR  | STATE OFFICE         | USE A   |                   | FORRE                | :CORI       |
| Approved by   |  |   | Title                | Date  | 1                 |                      |             |
| Conditions of approval, if any, are   | attached. Approval of this notice  | does not warrant or   | 1140                 |   | SEP               | 1 9 2006             | -           |

Office

which would entitle the applicant to conduct operations thereon.

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department of acety of MS Instead and Control of Co

(Instructions on page 2)



certify that the applicant holds legal or equitable title to those rights in the subject lease

which would entitle the applicant to conduct operations thereon.

# Endura Products Corporation

P.O. Box 3394, Midland, Texas 79702 Phone (432) 684-4233 Fax (432) 684-4277

# **WATER ANALYSIS**

| Date 10/1/2005 Sampling Point/Date Well Company Pogo Producing Formation   |  | Code 101023332 State County Well #3 |
|--|--|-------------------------------------|
| DISSOLVED SOLIDS   |  |                                     |
| <u>CATIONS</u>   | mg/l   | me/l                                |
| Sodium, Na+ (Calc.) Total Hardness as Ca++ Calcium Ca++ Magnesium, Mg+ Barium, Ba++ Iron (Total) Fe+++*            | 88,458<br>25,920<br>17,760<br>4,976<br>0<br>23 | 3,846<br>0<br>888<br>415<br>0       |
| <u>ANIONS</u>  |  |                                     |
| Chlorides, Cl-<br>Sulfate, SO4-<br>Carbonate, CO3-<br>Bicarbonates, HCO3-<br>Sulfide, S-*<br>Total Dissolved Solid | 182,500<br>250<br>0<br>268<br>0<br>294,235     | 5,141<br>5<br>0<br>4<br>0           |
| pH* Specific Gravity,60/60 F. Turbidity  | 5.764<br>1.184<br>180                          |                                     |

## **SCALING INDICIES**

| TEMP, F | CA CO3 | CASO4*2H2O | CA SO4  | BA SO4   |
|---------|--------|------------|---------|----------|
| 80      | 1.4729 | -0.1894    | -0.5811 | -29.5250 |
| 120     | 2.0746 | -0.2018    | -0.4132 | -29.6476 |
| 160     | 2.9820 | -0.2135    | -0.2522 | -29.8486 |

### **PERFORATIONS**