

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. 30-015-35041
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 Vortec 27
8. Well Number 1
9. OGRID Number 017891
10. Pool name or Wildcat Pierce Crossing Bone Spring East

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK OR 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 A : 660 feet from the North line and 330 feet from the East line  
Section 27 Township 24S Range 29E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
2917

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:		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 checked="" 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: <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 #631. Spud well @ 03:00 hrs 10/01/06. Drld 17-1/2" hole to 552'. TD reached @ 04:30 hrs 10/02/06. Ran 14 jts 13-3/8" 48# H-40 ST&C csg. Cmt'd w/ 300 sks 35:65 POZ C @ 12.8 ppg followed by 200 sks Cl "C" + 2% CaCl2 @ 14.8 ppg. Cmt did not circ. Topped out w/ 100 sks Cl C + 2% CaCl2 @ 14.8 ppg. Circ 15 sks to surface. WOC 24 hrs. Make cut-off. Weld on WH. NU BOP's & test to 3000# ok. Test csg to 1000# for 30 mins ok.

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 10/11/06

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

For State Use Only

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE OCT 13 2006  
Conditions of Approval (if any): FOR RECORDS ONLY