Submit 3 Copies To Appropriate District	State of New Mexico	Form C-103
Office District I	Energy, Minerals and Natural Resources	May 27, 2004
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.
District II	OIL CONSERVATION DIVISION	30-015-34767
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410		STATE S FEE S
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	5189101172732	
SUNDRY NOT	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM (C. 101) FOR SUCH 1996)	ISTATE "19"
1. Type of Well: Oil Well	Gas Well Other RECEIVED	8. Well Number 3
2. Name of Operator	Via och ARTESIA .	9. OGRID Number
POGO PRODUCING COMPANY		017891
3. Address of Operator	100	10. Pool name or Wildcat
P. O. BOX 10340, MIDLAND, TX	79702-7340	WILDCAT-UPPER PENN
4. Well Location		
	1980 feet from the SOUTH line and 21	00 feet from the EAST line
Unit Letter J :		
Section 19	Township 20S Range 27E	NMPM EDDY County
	11. Elevation (Show whether DR, RKB, RT, GR, etc.,	
Pit or Below-grade Tank Application 🔲 o	3255'	
	aterDistance from nearest fresh water well Dist	•
Pit Liner Thickness: mil	Below-Grade Tank: Volume bbls; Co	enstruction Material
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF IN	ITENTION TO: SUB	SEQUENT REPORT OF:
	PLUG AND ABANDON REMEDIAL WOR	
	CHANGE PLANS COMMENCE DRI	
-	MULTIPLE COMPL CASING/CEMEN	
OTHER:	☐ OTHER:	
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.	ork). See Rule 1103. For Multiple Completions: At	tach wellbore diagram of proposed completion
or recompletion.		
10/03/06 Drilled 10" ho	le from 50' to 55'. Lease hold @ 55'.	
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 \Box , a general permit \Box or an (attached) alternative OCD-approved plan \Box .		
SIGNATURE (SHL)		÷ ' 4
SIGNATURE COMMY W	TITLE SR ENG TECH	DATE <u>10/05/06</u>
Type or print name CATHY WRIG	HT E-mail address: wrightc@pogoproducing.con	Talanhana No. 422 606 0100
For State Use Only	D man address. wrighte@pogoproducing.com	1 Telephone No. 452-085-8100
	DECOURCE ONLY	OCT 4 0 sono
AII I KO V LD D I .	RECORDS ONLY	DATE 1 9 2006
Conditions of Approval (if any):		
:		