

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division

1625 N. French Dr.
Hobbs, NM 88240

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT-" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Pogo Producing Company

3. Address and Telephone No.

P.O. Box 10340, Midland, TX 79702-7340 432-685-8100

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

660' FNL & 2310' FWL, Section 27, T22S, R32E

5. Lease Designation and Serial No.
NM-69376

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
Federal 27 #3

9. API Well No.
30-025-33651

10. Field and Pool, or Exploratory Area
W. Red Tank Delaware

11. County or Parish, State

Lea County, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Knock out CIBP
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

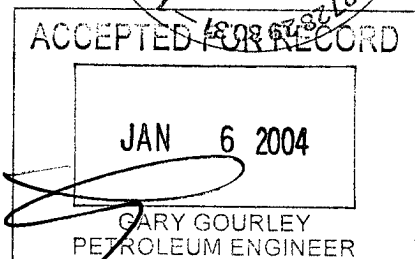
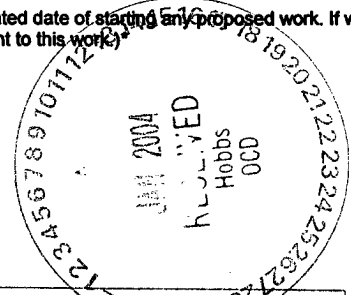
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

12/08/03 TOH w/ rods, pump & tbg.

12/10/03 Knock out CIBP @ 8297' & push to 8580'.

12/11/03 Return well to production.



14. I hereby certify that the foregoing is true and correct

Signed

[Signature]

Title

Sr. Operation Tech

Date

12/22/03

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date