

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL	
	GAS	
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PERMITS OFFICE		

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Pogo Producing Company		
Address P.O. Box 10340 Midland, Texas 79702		
Reason(s) for filing (Check proper box)		Other (Please explain)
<input checked="" type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name WBR Federal	Well No. 1	Pool Name, including Formation Bootleg Ridge Morrow <i>Gas</i>	Kind of Lease State, Federal or Fee Federal	Lease No. NM 58940
Location Unit Letter <u>H</u> : <u>1980</u> Feet From The <u>north</u> Line and <u>990</u> Feet From The <u>east</u>				
Line of Section <u>13</u> Township <u>22-S</u> Range <u>33-E 32</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
Enron Oil Trading & Transportation		P.O. Box 1188 Houston, TX 77251-1188	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
Llano, Inc.		921 W. Sanger Hobbs NM 88240	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
		13	22-S
			32-E
Is gas actually connected?	When		
yes	10-14-88		

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Natalie Hall  
(Signature)  
Petroleum Engineer  
(Title)  
10-24-88  
(Date)

OIL CONSERVATION DIVISION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY \_\_\_\_\_  
ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT SUPERVISOR  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

#### IV. COMPLETION DATA

V. COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
			X						
Date Spudded 1-14-88		Date Compl. Ready to Prod. 4-12-88		Total Depth 15,261			P.B.T.D. 15,207		
Elevations (DF, RKB, RT, GR, etc.), 364915'GR, 3678'KB		Name of Producing Formation Morrow		Top Oil/Gas Pay Gas			Tubing Depth 14,621		
Perforations 14678-80, 87-90, 698-700 714-26, 32-34, 38-42							Depth Casing Shoe 15,246		

#### TUBING, CASING, AND CEMENTING RECORD

MOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 $\frac{1}{2}$	13 $\frac{3}{8}$	750	785
12 $\frac{1}{2}$	10 $\frac{3}{4}$	4836	2017
9 $\frac{1}{2}$	7 $\frac{5}{8}$	12,150	1260
6 $\frac{1}{2}$	5 (liner)	15,246	650

#### V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

#### GAS WELL

Actual Prod. Test - MCF/D 411.5 MCF/D	Length of Test 4hrs	Bbls. Condensate/MMCF 20.4	Gravity of Condensate 61.0
Testing Method (piston, back pr.) Back pressure	Tubing Pressure (shut-in) 2067 psig	Casing Pressure (shut-in) 0	Choke Size 3/64" - 12/64"

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