

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Pogo Producing Company		Well API No. 30-025-31695
Address P. O. Box 10340, Midland, Texas 79702-7340		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	CONFIDENTIAL
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of operator give name and address of previous operator

THIS WELL HAS BEEN PLACED IN THE POOL

DESIGNATED BELOW. IF YOU DO NOT CONCUR

II. DESCRIPTION OF WELL AND LEASE THIS OFFICE

Lease Name Red Tank "23" Federal	Well No. 1	Pool Name, including Formation Red Tank - Bone Springs	Kind of Lease State, Federal or Fee	Lease No. NM-69375
Location Unit Letter P : 360 Feet From The South Line and 660 Feet From The East Line Section 23 Township 22-S Range 32-E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Enron Oil Transportation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1188, Houston, Texas 77252					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Natural Gas Pipeline of America	Address (Give address to which approved copy of this form is to be sent) HCR-60, Box 170, Lovington, N.M. 88260					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 23	Twp. 22-S	Rge. 32-E	Is gas actually connected? Yes	When? November 1, 1992

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded September 10, 1992	Date Compl. Ready to Prod. October 22, 1992		Total Depth 10,066'		P.B.T.D. 9,975'			
Elevations (DF, RKB, RT, GR, etc.) 3,757.6 GR	Name of Producing Formation Bone Spring		Top Oil/Gas Pay 9,932'		Tubing Depth 9,915'			
Perforations 9,932'-9,948' 32 holes					Depth Casing Shoe 10,066'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		840'		925 sxs Circ. 110 sxs			
11"	8-5/8"		4,740'		2350 sxs Circ. 89 sxs			
7-7/8"	5-1/2"		10,066'		1310 sxs			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (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.)

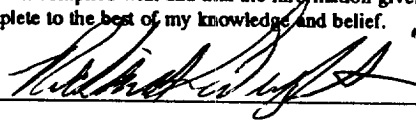
Date First New Oil Run To Tank October 22, 1992	Date of Test November 6, 1992	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 375#	Casing Pressure 800#	Choke Size 18/64"
Actual Prod. During Test	Oil - Bbls. 149	Water - Bbls. 31	Gas- MCF 175

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Signature 
Printed Name Richard L. Wright Div. Oper. Mgr.
Date November 6, 1992 Telephone No. (915) 682-6822

OIL CONSERVATION DIVISION

NOV 10 '92

Date Approved

By ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.