New Mexico Uli Conservation and Adam Anton Anton Action 1625 N. Hepopol Prints

1625 N. Frenc' Trive Holds, NM beam

Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

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BUREAU OF LAND MANAGEMENT		5. Lease Designation and Serial No. NM-77060	
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			6. If Indian, Allottee or Tribe Name
			7. If Unit or CA, Agreement Designation
1. Type of Well Oil Gas			8. Well Name and No.
Oil Gas Well Other 2. Name of Operator			Red Tank 34 Federal #1
Pogo Producing Company			9. API Well No.
3. Address and Telephone No.			30-025-31720
P. O. Box 1034C, Midland, TX 79702-7340 (915)685-8100			10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			Red Tank Delaware West 11. County or Parish, State
660' FNL & 16			
			Lea County, NM
12. CHECK AF	PPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, C	OR OTHER DATA
TYPE OF SUBMISSION TYPE OF ACTION			
Notice of Intent Abandonment Recompletion State Subsequent Report Plugging Back		Abandonment	Change of Plans
			New Construction
		☐ Non-Routine Fracturing☐ Water Shut-Off	
☐ Casing Repair ☐ Final Abandonment Notice ☐ Altering Casing XX Other Combine Delawar		Altering Casing	Conversion to Injection
		XX Other Combine Delaware Perfs	Dispose Water
			(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
04/12/02 04/16/02 04/18/02 04/19/02	POOH w/ rods & RIH w/ bailer, Knock out CIBP	Rail 65' fill to CIBP @ 8350'.	Work.)* WOR. 2017 WAR 2017 KIN HOURS KIN HOURS
14. I hereby certify that the following the following that the following that the following the following the following that the following the fo	In berlow	Title Sr. Operation Tech	Date 04/22/02

BUREAU OF LAND MGMT. POSWELL OFFICE

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