State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

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

WELL API NO.
30-025-31754

5. Indicate Type of Lease
Federal ☑   STATE ☐   FEE ☐

6. State Oil & Gas Lease No.
NM-69377

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name

Red Tank 28 Federal

1. Type of Well:
OIL WELL ☐   GAS WELL ☐   OTHER   SWD

2. Name of Operator
Pogo Producing Company

3. Address of Operator
P. O. Box 10340, Midland, TX 79702-7340

8. Well No.
3

9. Pool name or Wildcat
Delaware

4. Well Location
Unit Letter B : 330 Feet From The North Line and 2310 Feet From The East Line

Section 28   Township 22S   Range 32E   NMPM   Lea   County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11.   Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: Packer Integrity Test ☒		OTHER: Conversion to Injection ☒	

12. 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.

Pressure casing annulus from "0" psi to 540 psi. Held pressure 30 min. with
no pressure drop. Pressure chart attached.

SWD-52b

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE _____   TITLE Senior Operations Engineer   DATE 3/16/94

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)   FOR RECORD ONLY

MAR 1994

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: