

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

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

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

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. 30-015-31902
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Address P. O. Box 10340, Midland, Texas 79702
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Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	<input type="checkbox"/> Other (Please explain)
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THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.

Approval to flare casinghead gas from this well must be obtained from the BUREAU OF LAND MANAGEMENT (BLM).

CONFIDENTIAL

Lease Name Exxon "27" Fed.	Well No. 2	Pool Name, Including Formation Hillcrest, Delaware	Kind of Lease State (Federal) or Fee	Lease No. NM-81272
Location Unit Letter P : 660 Feet From The South Line and 660 Feet From The East Line Section 27 Township 22-S Range 32-E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil EOTT Energy Corp.	<input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	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 Transwestern Pipeline	<input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1188, Houston, Texas 77252
If well produces oil or liquids, give location of tanks.	Unit P Sec. 27 Twp. 22S Rge. 32E	Is gas actually connected? No When? 5/01/93

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 <input type="checkbox"/>	New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v <input type="checkbox"/> Diff Res'v <input type="checkbox"/>
Date Spudded 2/22/93	Date Compl. Ready to Prod. 3/21/93	Total Depth 8,836'
Elevations (DF, RKB, RT, GR, etc.) 3,669.2' GR	Name of Producing Formation Delaware	Top Oil/Gas Pay 8,393'
Perforations 8,393'-8,420'		Tubing Depth 8,433'
		Depth Casing Shoe 8,836'

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE 17-1/2"	CASING & TUBING SIZE 13-3/8"	DEPTH SET 845'	SACKS CEMENT 1025 sx-Circ 300sx
11"	8-5/8"	4,565'	1800 sx-Circ 300sx
7-7/8"	5-1/2"	8,836'	1320 sx - TOC @ 1,828'

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 3/21/93	Date of Test 4/27/93	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 80 PSI	Casing Pressure 50	Choke Size 8/64"
Actual Prod. During Test	Oil - Bbls. 52	Water - Bbls. 4	Gas - MCF 36

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
Barrett L. Smith Sr. Operations Engineer
Printed Name
April 29, 1993 (915) 682-6822
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAY 03 1993
By ORIGINAL SIGNATURE OF LARRY J. JENKINSON
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.

RECEIVED

APR 30 1993

AND RECORDS SECTION