Form 3160-5 (June 1990)

I. Type of Well

2. Name of Operator

Oil Weil Gas

3. Address and Telephone No.

Pogo Producing Company

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No. NM-2379

3. Weil Name and No.

30-025-32036

10. Field and Pool, or Exploratory Area

9. API Weil No.

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

P. O. Box 10340, Midland, TX 79701-7340 (915)682-6822

give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

Covington "A" Federal No. 9

| 4. Location of Weil (Footage, Sec., T., R., M., or Survey Description) 480' FSL & 1980 FWL, Section 25, T22S, R32E | | Red Tank Bone Spring 11. County or Parish, State Lea County, NM |
|---|---|---|
| 12. CHECK APPROPRIATE BOX(| s) TO INDICATE NATURE OF NOTICE, REPOR | RT, OR OTHER DATA |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| Notice of Intent | Abandonment | Change of Plans |
| Subsequent Report | Recompletion Plugging Back | New Construction Non-Routine Fracturing |
| Final Abandonment Notice | Casing Repair Altering Casing Other Intermediate Casing pertinent details, and give pertinent dates, including estimated date of starting | Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well |

Drilled 11" hole 852' to 4700'. TD reached @ 1145 hrs CDT 10/8/93. Ran 105 jts 8-5/8", 32#, S-80 & J-55, ST&C casing. Float shoe @ 4700'. Float collar @ 4653'. Howco cemented casing with 1400 sx Halliburton Lite @ 12.7 ppg followed by 200 sx Premium Plus @ 14.8 ppg. Plug down @ 0200 hrs CDT 10/9/93. Recovered 60 sx excess cement. Set slips & make cut-off. ND BOP's. Weld on casing head. NU BOP's. Test casing, blind rams and manifold to 1500 psi.

| 4. I hereby certify that the foregoing is true and correct Signed | Tide Division Operations Manager | Date Nov. 24, 1993 |
|---|----------------------------------|--------------------|
| (This space for Federal or State office use) Approved by Conditions of approval, if any: | Tide | Date |