State of New Mexico L. .rgy, Minerals and Natural Resources Departme.

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 SUNDRY NOTICES AND REPORTS ON W (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEP DIFFERENT RESERVOR. USE "APPLICATION FOR I (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: OIL OTHER	St. 87505 /ELLS EN OR PLUG BACK TO A	WELL API NO. 30-025-3310 sIndicate Type of Lea State Oil & Gas Leas V-3526 Lease Name or Unit Red Tank 30	se STATE X FEE se No. Agreement Name
2Name of Operator		₃Well No.	
Pogc Producing Company Address of Operator		Pool name or Wildca	nt
P. O. Box 10340, Midland, TX 7970207340		W. Red Tank	
Well Location Unit Letter L: 2145 Feet From The South	Line and330	Feet From The	West Line
Section 30 Township 22S	Range 33E	NMPM Le	a County
w∈Elevation (<i>Show whether</i> land the state of the state	DF, RKB, RT, GR, etc.)		
11 Check Appropriate Box to Indicate NOTICE OF INTENTION TO:	SUB	port, or Other E	
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING O	PNS.	PLUG AND ANBANDONMENT
PULL OR ALTER CASING	CASING TEST AND CEME	ENT JOB	
OTHER:	OTHER: Add Pa	У	
10/10/02 TOH w/ pump & rods. 10/11/02 TOH w/ tbg. Perf Delaware 8134-50 w/ 1 spf. Perf to 3000# ok. Circ hole w/ 2% KCL FW. Spot 10/12/02 Acdz 8086-94 & 8134-50 w/ 1200 gals 7-1/2% aci 10/15/02 Retrieve RBP @ 8404 & TOH. Return well to produce the supplemental state of the sup	rf Delaware 8086-94 w, t 14' sd on top of RBP. d. Swab. duction.		
I hereby certify that the information above is true and complete to the best of my known that the information above is true and complete to the best of my known that the information above is true and complete to the best of my known that the information above is true and complete to the best of my known that the information above is true and complete to the best of my known that the information above is true and complete to the best of my known that the information above is true and complete to the best of my known that the information above is true and complete to the best of my known that the information above is true and complete to the best of my known that the information above is true and complete to the best of my known that the information above is true and complete to the best of my known that the information above is true and complete to the best of my known that the information above is true and complete to the best of my known that the information above is true and the information above is true and the information above is the information above is true above in the information above is the information above is true above in the information above is true above in the information above in the information above is true above in the information above in the informatio	_	e e Teat	10/00/00
SIGNATURE COTY JANDUL	тице <u>Sr. Operati</u>		DATE10/30/02
TYPE OR PRINT NAME Cathy Tomberlin	(915)	685-8100	TELEPHONE NO.
(This space for State Use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	CREATION SIGNED THE PAUL F KAUT; FETROLFULLUS A	987	JAN 1 4 2003

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-105 Revised 1-1-89

DISTRICT I		OII	OIL CONSERVATION DIVISION					WELL API NO.						
P.O. Box 1980, Hobbs,	NM 88240	OIL		0 Pached		DIVIC	1011	131	0-025-3					
DISTRICT II P.O. Drawer DD, Artesia	a, NM 88210			ta Fe,		87505		5.	Indicate T	ype of		те Х	FEE	
DISTRICT III								6.	State Oil 8	k Gas			TEC!	_
1000 Rio Brazos Rd, A	ztec, NM 8741	0						γ.	-3526					
WELL CO	OMPLETIC	N OR REC	OMPLETION	ON REP	ORT A	ND LOG					4 - 15			
1a. Type of Well: OIL WELL X GAS WELL DRY OTHER						7.	7. Lease Name or Unit Agreement Name							
b. Type of Completion:								R	ed Tank	30	Stati	ρ		
NEW WORK WELL OVER	DEEPE	PLUG BACK	DIFI	VR OTI	HER				cu rum		0000	-		
2. Name of Operator	ng Compa	. n. /	,					8. 2	Well No.					
Pogo Produci 3. Address of Operator	ng compa	1119							9. Pool name or Wildcat					
P. O. Box 10	340, Mic	dland, TX	79702-	7340				1	W. Red Tank Delaware					
4. Well Location						· 	•							_
Unit Letter	<u> </u>	2145 Fee	t From The	South		Line a	and	330	Feet	From	The W	<u>est</u>	Line	:
Section 3	0	Town	ship 22		Range	33		NMP	M	Lea			County	
10. Date Spudded	11. Date T.D.	Reached	12. Date Com		to Prod.)	13.		•	RKB, RT, G	R, etc	.) 1	4. Elev	. Casinghead	_
45 Total Donth	()	lua Baak T D	10/02/	02 7. If Multiple	Compl. H	low	375	tervals	Data - T-	-1-		O-11: T		_
15. Total Depth 9020		lug Back T.D. P @ 8800	! '	Many Zor		iow .		illed By	Rotary To	ois		Cable To	DOIS	
19. Producing Interval(s)	•	etion - Top, Botto	om, Name			,				20. \	Was Dire	ctional	Survey Made	
Delaware 85									l 	<u> </u>				_
21. Type Electric and Other Logs Run							22. Was Well Cored							
23.		CAS	SING RE	CORD	(Repo	rt all str	ings s	set in v	vell)					
CASING SIZE		HT LB/FT.	B/FT. DEPTH SET HO			DLE SIZE CEMENTING RECORD AN			AM	OUNT PULLED				
10-3/4	32						775 s							
7-5/8	26,4		9-7 9020 6-3					10 sks			<u> </u>			
4-1/2	11,6		9020		6-3	/4	-	1050	SKS					_
										· · · ·				
4. LINER RECORD						25.						_		
SIZE TOP B		ВО	TTOM SACKS CEMENT		SCREEN		ļ	1			SET	PACKER SET	_	
								2	-3/8		<u>8345</u>			_
26. Perforation record	l (interval, siz	e, and number	<u>l</u> r)		L	27 ACI	D. SH	OT. FF	RACTUR	F C	FMFN1	SOL	JEEZE, ETC.	_
		•	,			DEPTH							IAL USED	_
8550-75 (2	spf)					8550-	75						?-1/2% acid	<u>I</u>
						<u> </u>		•	Frac w	/ 1	06,00	0# 16	5/30 SLC	_
28.			P	RODU	CTIOI	.L	_							_
Date First Production 10/02/02		Producti Pumping	on Method (Flo				type pui	mp)			Well Sta	itus (Pr	od. or Shut-in)	_
Date of Test	Hours Tes	<u> </u>	hoke Size	Prod'n F		Oil - BbL.		Gas - M		Wate	r - BbL.		Gas - Oil Ratio	_
10/06/02	24	acquire 6	Calculated 24	Test Per		67	NCE	50		98	07.0		746:1	
Flow Tubing Press.	Casing Pre		Calculated 24- Hour Rate	Oil - Bb	!L .	Gas -	MCF	Wate	er - BbL.		Oil Gravi	•	· (Com.)	
29. Disposition of Gas (Sold, used for	fuel, vented, etc.)								sed By			_
30. List Attachments														_
C-104														

Printed Cathy Tomberlin

31. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief

_____Sr. Oper. Tech

10/07/02

_Date _