

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
En , 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
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO.	30-025-33109
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	V-3526
7. Lease Name or Unit Agreement Name	
RED TANK "30" STATE	
8. Well No.	2
9. Pool name or Wildcat	
EAST RED TANK-BONE SPRING	

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.)	
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	
2. Name of Operator POGO PRODUCING COMPANY	
3. Address of Operator P.O. BOX 10340 MIDLAND, TEXAS 79702-7340	
4. Well Location Unit Letter <u>Let 3</u> : 330' Feet From The WEST Line and 2145' Feet From The SOUTH Line Section 30 Township 22S Range 33E NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3755' GR.	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: Extend Permit to drill ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

1. Pogo Producing Company requests the extension of their drilling permit on RED TANK "30" STATE # 2, located in section 30 T22S-R33E LEA CO. NM.

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

SIGNATURE Joe T. Janica TITLE Agent DATE 03/23/00
TYPE OR PRINT NAME Joe T. Janica TELEPHONE NO. 505-391-8503

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE 03 24 2000
CONDITIONS OF APPROVAL, IF ANY:

