| Submit 3 Copies<br>to Appropriate<br>District Office   | State of New Mexico<br>Ener inerals and Natural Resources Department<br>OIL CONSERVATION DIVISION<br>2040 Pacheco St.<br>Santa Fe, NM 87505                            |  |   | Form C-10<br>Revised 1 |         |
|--|--|--|---|------------------------|---------|
| DISTRICT I<br>P.O. Box 1980, Hobbs, NM 88240   |  |  | WELL API NO.<br>30-025-33431                            |                        |         |
| DISTRICT II<br>P.O. Drawer DD, Artesia, NM 88210   |  |  | sIndicate Type of Lease                                 | STATE                  | FEE     |
| DISTRICT III<br>1000 Rio Brazos Rd., Aztec, NM 87410   |  |  | .sState Oil & Gas Lease №<br>V-3527                     |                        |         |
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A<br>DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"<br>(FORM C-101) FOR SUCH PROPOSALS.) |  |  | rLease Name or Unit Agreement Name<br>Red Tank 31 State |                        |         |
| Type of Well:<br>OIL GAS<br>WELL W WELL  | OTHER  |  |   |                        |         |
| 2Name of Operator  | CONFI  | ₀Well No.<br>2   |   |                        |         |
| Pogo Producing Company<br>Address of Operator<br>P. O. Box 10340, Midland, TX 7  |  | ••••••••••••••••••••••••••••••••••••••                                       | Pool name or Wildcat<br>Red Tank Bone Sp                | pring E.               |         |
| Well Location<br>Unit LetterE :1650  | _ Feet From The North  | Line and 330   | Feet From The   | West                   | Line    |
| Section 31   | Township 22  | Range 33   | NMPM  | Lea co                 | ounty   |
|  | <sup>30</sup> Elevation (Show whether Di<br>3744' GR   | F, RKB, RT, GR, etc.)  |   |                        |         |
| 11 Check /   | Appropriate Box to Indicate N  | Nature of Notice, Re   | port, or Other Da                                       | ta                     |         |
| NOTICE OF INTENTION TO: SUB  |  |  | SEQUENT REP   | ORT OF:                |         |
|  | PLUG AND ABANDON   | REMEDIAL WORK  |   | ALTERING CASING        |         |
|  | CHANGE PLANS   | COMMENCE DRILLING OPNS.  |   |                        |         |
| PULL OR ALTER CASING   |  | CASING TEST AND CEM  |   |                        |         |
| OTHER:   |  | OTHER: Spud, Set S   | urface, Intermediate &                                  | & Production Csg       |         |
| 12Describe Proposed or Completed Operati<br>work) SEE RULE 1103.   | ons (Clearly state all pertinent details, and g  | ive pertinent dates, including e   | stimated date of starting an                            | y proposed             |         |
| -0045  hm  CDT 04/07/00  Ran 2   | TMBR/Sharp #10. Spud well @<br>1 jts 10-3/4" 32.75# J-55 STC csg<br>6 CaCl2 @ 14.8 ppg. Circ 225 sks<br>to 1000# ok.   | L IPGS (0) 822 BJ CT   | T O W/ 620 SKS CI "C"                                   | 35:55 POZ (0) I        | Z.o ppg |
| aboo @ 4720' Élect collar @ 4  | ole to 4730'.  TD reached @ 1614<br>680'.  BJ cmt'd w/ 1600 sks 35:65<br>llug down @ 0630 hrs CDT 04/13  | Poz @ 12 4 ppg follow  | ed by 150 sks Cl "C                                     | " + 2% CaCi2 (0        | 2 14.8  |
| jts 4-1/2" 11.60# N-80 & J-55 L<br>CI "H" + .3% FL52 + .3% CD32<br>stage w/ 400 sks CI "C" + .15%  | 4" hole to 9050'. TD reached @ 1<br>'C csg. Float shoe @ 9050'. Floa<br>+ .15% SMS + .1% R3 @ 15.7 pp<br>FL52 + .75% CD32 + 12 pps Gils<br>WH. CBL ran 05/03/00. TOC @ | at collar @ 9003'. DV to<br>g. Drop plug & displac<br>onite @ 14.09. Plug do | ool @ 6032". BJ cmt<br>e cmt. Circ 95 sks to            | o surface. Cmt         | d 2nd   |
| I hereby certify that the information above  | is true and complete to the best of my know  | ledge and belief.  |   |                        |         |
| SIGNATURE Cothy  | nbuli  | TITLE Operation Tech   |   | DATE05-16-00           | )       |
| (/   |  |  |   |                        |         |

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\_\_\_\_\_ DATE \_\_\_\_\_

. APPROVED BY

3 C CONDITIONS OF APPROVAL, IF ANY: