g: g.com			
NO. OF COPIES RECI	Ĺ		
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OF			
Operator			
	Pogo	Produc	
Address .			
	P.0.	Box	10

	BANTA FE	1	FOR ALLOWABLE	Supersedés ()l Elloctive 1-1-6	d C-104 and C-19	
	FILE U.S.G.S.	AUTHORIZATION TO TRA	AND NSPORT OIL AND NATHE			
	LAND OFFICE	AOTHORIZATION TO TRA	NO ON TOPE AND NATOR	THE ONE		
	TRANSPORTER OIL					
	OPERATOR GAS	1		•		
	PROPATION OFFICE					
-	Operator Doop Dwody	ring Company				
	Address .	cing Company			- <u> </u>	
	P.O. Box 10		9702			
	Reason(s) for filing (Check proper box	Change in Transporter of:	Other (Please explain	n)		
	New Well Recompletion	Oil Dry Gar				
	Change in Ownership	Casinghead Gas Conden	sate			
	If change of ownership give name					
	and address of previous owner					
H.	DESCRIPTION OF WELL AND	LEASE		· · · · · · · · · · · · · · · · · · ·		
	Lease Name	Well No. Pool Name, Including Fo		f Lease Federal or Fee C+3+0	Lease No.	
	State L-922	2 Wildcat	State	Federal or Fee State	_ _L-922	
	Unit Letter <u>J</u> ; 1980 Feet From The <u>East</u> Line and <u>1780</u> Feet From The <u>South</u>					
			A.F. Numer to	_	C	
	Line of Section 28 To	wnship 21-S Range 3	4-E NMPM, Le	<u>a</u>	County	
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S			
	Name of Authorized Transporter of Oil Scurlock Oil Co.	or Condensate (A)	Address (Give address to which 511 W. Ohio, Suite	200 Midland, Texa	10 be sent! IS 79701	
	Name of Authorized Transporter of Car	singhead Gas or Dry Gas [V]	!	approved copy of this form is		
	Llano Inc.		P.O. Box 1320 Hobb		, NM 88240	
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected?			
	give location of tanks.	<u>, J </u>	Yes	10/22/85		
IV.	If this production is commingled wincompletion DATA	th that from any other lease or pool,				
	Designate Type of Completion	on (Y)	New Wall Workover Dee	1 1	I	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	<u> </u>	
	7/15/78	10/22/85	14,195'	12,555'		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth		
	3726 GR	Pennsylvanian	12,169'	12,145 Depth Casing Shoe		
	12.169'-12.176', + 12,351'-12,375', + 12,397'		' - 12,403'	14,195'		
		TUBING, CASING, AND	CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	380'	SACKS CE	MENI	
	17 1/2 12 1/4	13 3/8 9 5/8	5022'	2825		
	8 3/4	7	12,141	800 240		
	6 1/8	OR ALZOVABLE 2(T3/18" be a	14,195'			
V	. TEST DATA AND REQUEST F OIL WELL	OR ALEOWABLE "(Trainmust be a able for this de	That of he los latt 24 menses		exceed top air.	
	Date First New Oil Hun To Tanks	Producing Method (Flow, pump	, gas lift, etc.)			
		Tubing Pressure	Casing Pressure	Choke Size		
-	Length of Test	I dibility i root die				
	Actual Prod. During Test	Oil-Bhis.	Water-Bbls.	Gan-MOF		
	GAS WELL		· .			
	Actual Prod. Tent-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condemnat		
	Testing hiethod (pitot, back pr.)	4 Hrs. Tubing Pressure (Shut-in)	Casing Pressure (Shut-in).	Choke Size		
	Back pressure	5055	600	12/64" - 17/	64"	
VI	. CERTIFICATE OF COMPLIAN	ICE .	OIL CONS	ERVATION COMMISSIO	DN .	
			APPROVED NOV 2 0 1985 . 19			
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			BY Sale W Seets TITLE OH & See Inspector			
		•	This form is to be fi	led in compliance with RUL	E 1104.	
	HX III	estura!	if this is a request for allowable for a newly deliled or despen- well, this form must be accompanied by a tabulation of the devia-			
Production Superirtendent			topic taken on the wall in accordance with RULL 111. All sections of this form must be filled out completely for all			
	(T	(tle)	eble on new and recompleted walls.			
	11/6/85	Fill out only Section well name or number, or to	ns I. II. III, and VI for chember such char	augen of a		
	(L	(ate)	11	-		