

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State ☒	Fee ☐
5. State Oil & Gas Lease No.	
V - 307	

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. ☐ OIL WELL ☒ GAS WELL ☐ OTHER		7. Unit Agreement Name
2. Name of Operator Pogo Producing Company		8. Farm or Lease Name GRW
3. Address of Operator P.O. Box 10340 Midland, Texas 79702		9. Well No. 1
4. Location of Well UNIT LETTER G 1980 FEET FROM THE North LINE AND 1650 FEET FROM THE East LINE, SECTION 27 TOWNSHIP 21-S RANGE 34-E NMPM.		10. Field and Pool, or Wildcat Undesignated
11. Elevation (Show whether DF, RT, CR, etc.) 3712.9 GR		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☐	
		OTHER P & A Deep zones & TA well ☒	

17. 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.

5/24/85 - TD 13,405', MW 12.5 ppg
Howco spotted 35 sxs C1 H cmt w/0.2% HR5 from 12,604'-12,504'. PU DP to 12,010', spotted 35 sxs C1 H w/0.2% HR5 from 12,010' to 11,910', POH to 11,440' & circ.

5/25/85 - PBD 11,910', MW 12.5 ppg
Howco spotted 35 sxs C1 H w/0.2% HR5 from 11,440' to 11,340'. POH, LD DP, ND BOP's.
jet & clean bits & released rig @ 2:00 am MDT 5/25/85. Well TA, waiting on csa pullers.

Plugging procedures were approved orally by Jerry Sexton NMCCD.

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

SIGNED [Signature] TITLE Division Operations Manager DATE 6/11/85

APPROVED BY _____ TITLE _____ DATE JUN 11 1985

CONDITIONS OF APPROVAL, IF ANY: