Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division get Bureau No. 1004-0135
1625 N. French Dr. Expires: March 31, 1993
Hobbs NM 88240 NM 09101

SUNDRY NOTICES AND		6. If Indian, Allottee or Tribe Name
Do not use this form for proposals to drill or to deepen or reentry to a different reservo Use "APPLICATION FOR PERMIT-" for such proposals SUBMIT IN TRIPLICATE 1. Type of Well Oil Gas Well Other		
		N/A
		7. If Unit or CA, Agreement Designation N/A
		2. Name of Operator
POGO PRODUCING COMPANY		9. API Well No.
3. Address and Telephone No. P. O. Box 10340, Midland, Texas 79702-0340 915/685-8100		30 02531650 10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		Red Tank West (Delaware)
2201 FCL # 22101 FFL Continu # T 22 C D 20 F		11. County or Parish, State
330' FSL & 2310' FEL, Section 4, T-23-S, R-32-E		Lea County, New Mexico
12. CHECK APPROPRIATE BOX(s) TO I	NDICATE NATURE OF NOTICE, REPORT	, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
XX Notice of Intent	Abandonment	Change of Plans
	Recompletion	New Construction
Subsequent Report	XX Plugging Back	Non-Routine Fracturing
	Casing Repair	☐ Water Shut-Off VV Comment to be
Final Abandonment Notice	☐ Altering Casing ☐ Other	Conversion to Injection Dispose Water
		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
Describe Proposed or Completed Operations (Clearly state all p directionally drilled, give subsurface locations and measured an	pertinet details, and give pertinent dates, including estimated d d true vertical depths for all markders and zones pertinent to t	ate of starting any proposed work. If well is his work.)*
The operator proposes to plug back foll to disposal well for produced water from	owing production test of interval28596' om operator's production nearby	- 8615' and convert
Tentative Program:		
* set CI BP at 8500' and cap	w/cement	
* perforate selected interval		
* acidize and fracture		. 1
* run injection string and packer to 4785'		No Order
Work to begin as soon as Application to Inject is approved by NM OCD		^
		for this at this time
		this time.
		INCS (CINCE)
14. I hereby certify that the foregoing is true and correct		A
Signed Dilepeska	. Title Agent (P. E.)	Date <u>08/30/00</u>
(This space for Federal of State office use)	PETROLEUM ENGINEER	SEP 0 8 2000
Approved by	Title	Date SEF V 0
Conditions of approval, if any:		

