

P. O. BOX 10340

HOBBS, NEW MEXICO 88401

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other

2. NAME OF OPERATOR
Pogo Producing Company

3. ADDRESS OF OPERATOR
P.O. Box 10340 Midland, Texas 79702

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL & 1980 FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

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(other) Run & Cmt 20" Csg.

5. LEASE
NM 14160
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Mosbacher 20
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
Wildcat
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 20, T-26-S, R-34-E
12. COUNTY OR PARISH
Lea
13. STATE
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3350' GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

5/24/82 TD 26" hole at 902'. Circ. POH. Ran 22 jts (889.5') of 20" 94# J-55 ST&C csg. FS - 1.25, FC 2.25 total string 893'. 20" csg set at 893'. Prep to cmt.
5/25/82 Cmt w/1150 sx C1 C w/4% gel, 2% CaCl₂ & 1/4# Flocele/sx. Followed by 400 sx C1 C w/2% CaCl₂ & 1/4# Flocele/sx. Circ 175 sx. Cmt in place at 7:15 am. MDT 5/24/82. WOC 21 3/4 hr. NU. RIH.
5/26/82 Test 20" csg and Hydril to 500 psi 30 min, OK. Drill cmt and drill new formation. Total WOC 23 hr.

Subsurface Safety Valve: Manu. and Type

18. I hereby certify that the foregoing is true and correct

SIGNED James R. Henry

TITLE Division Engineer

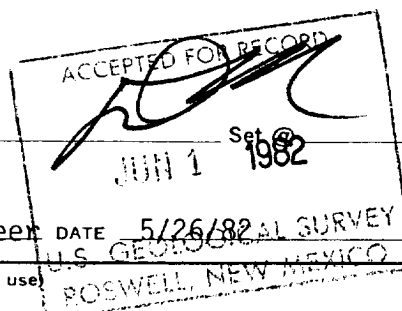
(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE



RECEIVED

JUN 3 1982

O.C.D.
HOBBS OFFICE