

UNITED STATES
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 & 660' FWL
AT TOP PROD. INTERVAL: 1980' FSL & 660' FWL
AT TOTAL DEPTH: 1980' FSL & 660' FWL

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

REQUEST FOR APPROVAL TO:

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

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☒

5. LEASE

NM 19453

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal 53 "COM"

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 17, T-26-S, R-34-E

12. COUNTY OR PARISH

Lea

13. STATE
New Mexico

14. API NO.

30 025 28402

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3360.6' GR 3387' KB

(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.)*

8/22/84 - PBSD 13,880' 10 ppg brine, Perf 2 7/8" tbg w/3 holes @ 13,310'-
to 311'. Kill well, cut tbg w/jet cutter @ 13,333'. Ran 5" 18#
8/27/84 CIBP & set @ 13,290'. Ran 7 5/8" CIBP & set @ 12,500'. (Witnessed
by BLM) Placed 36' C1 A cmt on CIBP from 12,500'-12,464'. SI
well w/csg relief valve open. WO csg pullers.

CONTINUED ON ATTACHED SHEET

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Daniel J. Gillespie

TITLE Operations Engineer

DATE 9/18/84

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE 9-3-86

CONDITIONS OF APPROVAL, IF ANY: