

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. O. Cons. Division  
1625 N. French Dr.  
Hobbs, NM 88240  
NM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993  
Lease Designation and Serial No.  
NM-66925

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT-" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Well Name and No. Diaga 18, Federal #1
2. Name of Operator Pogo Producing Company	8. Well Name and No. Diaga 18, Federal #1
3. Address and Telephone No. P. O. Box 10340, Midland, TX 79702-7340 (915)685-8100	9. API Well No. 30-025-33626
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FSL & 1980' FWL, Section 18, T24S, R32E	10. Field and Pool, or Exploratory Area E. Cotton Draw Delaware
	11. County or Parish, State Lea County, NM

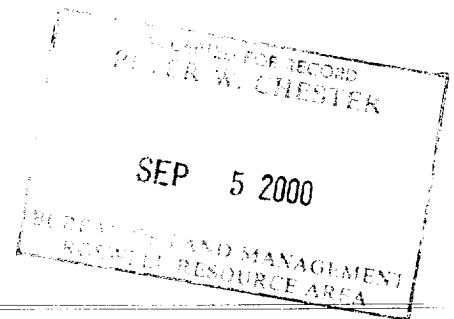
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input checked="" type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)\*

03/03/97 TOH w/ rods & pump.  
03/04/97 RIH w/ CIBP & set @ 8500'. Perf Delaware 8300'-38' w/ 2 spf. Test CIBP to 3000# ok. Acdz w/ 1000 gals 7-1/2% HCL.  
03/05/97 Swab. RIH w/ CIBP & set @ 8200'. Perf Delaware 7860'-88' w/ 2 spf.  
03/06/97 Test CIBP to 3000# ok. Acdz 7860'-88' w/ 1000 gals 7-1/2% HCL.  
03/07/97 Swab.  
03/08/97 Frac 7860'-88' w/ 43,000# 16/30 TLC. Swab.  
03/10/97 TIH w/ production equipment. Turn well to production.



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

Signed Cathy Lambert Title Operation Tech Date 08/23/00  
(This space for Federal or State office use)  
Approved by Chris Williams Title DISTRICT 1 SUPERVISOR Date SEP 25 2000  
Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side

70 E Cotton Draw Bone Spring

