POGO PRODUCING CO Form SC 13G/A February 14, 2007

Schedule 13G

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

SCHEDULE 13G

Under the Securities Exchange Act of 1934

(Amendment No. ____) *

30

	POGO PRODUCING COMPANY		
	(Name of Issuer)		
	COMMON SHARES		
_	(Title of Class of Securities)		
730448107			
_	(Cusip Number) 12/31/2006		
(Da	te of Event Which Requires Filing of this Statement		

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

[X] Rule 13d-1(b)
[] Rule 13d-1(c)
[] Rule 13d-1(d)

*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities

Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes). Schedule 13G Page ____ of ___ Pages CUSIP No. ____730448107 1. Name of Reporting Person and I.R.S. Identification No.: State Farm Mutual Automobile Insurance Company 37-0533100 2. Check the appropriate box if a Member of a Group (a) ____ (b) ___X__ 3. SEC USE ONLY: 4. Citizenship or Place of Organization: Illinois Number of 5. Sole Voting Power: 3,180,145 Shares Beneficially 6. Shared Voting Power: 0 Owned by 7. Sole Dispositive Power: 3,180,145 Each Reporting Person With 8. Shared Dispositive Power: 0 9. Aggregate Amount Beneficially Owned by each Reporting Person: 3,180,145 10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares: 11. Percent of Class Represented by Amount in Row 9: 5.44 % 12. Type of Reporting Person: IC Schedule 13G Page ____ of ___ Pages CUSIP No. ____730448107 1. Name of Reporting Person and I.R.S. Identification No.: State Farm Life Insurance Company 37-0533090 2. Check the appropriate box if a Member of a Group (a) _____ (b) __X__ 3. SEC USE ONLY: 4. Citizenship or Place of Organization: Illinois Number of 5. Sole Voting Power: 957,766 Beneficially 6. Shared Voting Power: 0 Owned by 7. Sole Dispositive Power: 957,766 Each Reporting Person With 8. Shared Dispositive Power: 0 9. Aggregate Amount Beneficially Owned by each Reporting Person: 957,766

10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares: _____

11. Percent	of Class Represented by Amount in Row	9: 1.64 %
12. Type of	Reporting Person: IC	•
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CUSIP No	730448107	
	Reporting Person and I.R.S. Identificarm Fire and Casualty Company 37-053308	
2. Check the (a) (b)X_		up
3. SEC USE	ONLY:	•
4. Citizens	hip or Place of Organization: Illinois	-
Number of Shares	5. Sole Voting Power: 146,400	
	6. Shared Voting Power: 0	
Each Reporting	7. Sole Dispositive Power: 146,400	
Person With	8. Shared Dispositive Power: 0	
9. Aggregat	e Amount Beneficially Owned by each Re	porting Person: 146,400
10. Check Bo	x if the Aggregate Amount in Row 9 exc	ludes Certain Shares:
11. Percent	of Class Represented by Amount in Row	9: 0.25 %
12. Type of	Reporting Person: IC	
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CUSIP No	730448107	
	Reporting Person and I.R.S. Identificarm Insurance Companies Employee Retire	
2. Check the (a) (b)X	 -	up
3. SEC USE	ONLY:	
4. Citizens	hip or Place of Organization: Illinois	
Number of		
Shares	5. Sole Voting Power: 1,235,766	
Shares Beneficially Owned by		

9. Aggregate Amount Beneficially Owned by each Reporting Person: 1,235,766

10.	Chec	ck Box if t	the Aggregate Am	ount in Row 9 exc	cludes Certain Shares:
11.	Pero	cent of Cla	ass Represented	by Amount in Row	9: 2.11 %
12.	Туре	e of Report	ing Person: EP		-
Sche	edule	e 13G			Page of Pages 6 9
Item	1(a)	and (b).	Name and Addre	ss of Issuer & Pr	rincipal Executive Offices:
			POGO PRODUCING 5 GREENWAY PLAZ P.O. BOX 2504 HOUSTON, TX. 7	A, SUITE 2700	
Item	2(a)	. Name of	f Person Filing:	State Farm Mutua	al Automobile Insurance
				Company and rela	ated entities; See Item 8
Item	2 (b)	. Address	s of Principal B	usiness Office: (One State Farm Plaza
					Bloomington, IL 61710
Item	2(c)	. Citizen	nship: United St	ates	
Item	2 (d)	and (e).	Title of Class	of Securities ar	nd Cusip Number: See above.
Item	3.	This Scheo	dule is being fi	led, in accordanc	ce with 240.13d-1(b).
		See Exhib:	it A attached.		
Item	4(a)	. Amount	Beneficially Ow	ned: 5,520,077 sh 	nares
Item	4 (b)	. Percent	of Class: 9.45	percent pursuant	to Rule 13d-3(d)(1).
Item	4 (c)	. Number	of shares as to	which such perso	on has:
		(ii) Sha (iii) So	ared power to vo ble Power to dis	-	
Item	5.	Ownership	of Five Percent	or less of a Cla	ass: Not Applicable.
Item	6.	Ownership	of More than Fi	ve Percent on Beh	nalf of Another Person: N/A
Item	7.	Identifica	ation and Classi	fication of the S	Subsidiary Which Acquired
		the Securi	ity being Report	ed on by the Pare	ent Holding Company: N/A

Item 8. Identification and Classification of Members of the Group:				
	See Exhibit A attached.			
Item 9.	Notice of Dissolution of Grou	p: N/A		
Schedul	e 13G	Page of Pages 7 9		
my know acquire for the influed not acc	wledge and belief, the securit ed in the ordinary course of b e purpose of and do not have t noing the control of the issue quired in connection with or a ction having such purpose or e	usiness and were not acquired he effect of changing or r of such securities and were s a participant in any ffect.		
Signature After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.				
	01/11/2007	STATE FARM MUTUAL AUTOMOBILE		
	Date	INSURANCE COMPANY		
		STATE FARM LIFE INSURANCE COMPANY		
		STATE FARM FIRE AND CASUALTY COMPANY		
	FARM INSURANCE COMPANIES OYEE RETIREMENT TRUST	STATE FARM INVESTMENT MANAGEMENT CORP.		
STATE FARM INSURANCE COMPANIES SAVINGS AND THRIFT PLAN FOR U.S. EMPLOYEES		STATE FARM ASSOCIATES FUNDS TRUST - STATE FARM GROWTH FUND		
		STATE FARM ASSOCIATES FUNDS TRUST - STATE FARM BALANCED FUND		
		STATE FARM MUTUAL FUND TRUST		
/s	/ Paul N. Eckley	/s/ Paul N. Eckley		
Pau. Schedul	l N. Eckley, Fiduciary of each of the above e 13G	Paul N. Eckley, Vice President of each of the above Page of Pages		

EXHIBIT A

This Exhibit lists the entities affiliated with State Farm Mutual Automobile Insurance Company ("Auto Company") which might be deemed to constitute a "group" with regard to the ownership of shares reported herein.

Auto Company, an Illinois-domiciled insurance company, is the parent company of multiple wholly owned insurance company subsidiaries, including State Farm Life Insurance Company, and State Farm Fire and Casualty Company. Auto Company is also the parent company of State Farm Investment Management Corp. ("SFIMC"), which is a registered transfer agent under the Securities Exchange Act of 1934 and a registered investment advisor under the Investment Advisers Act of 1940. SFIMC serves as transfer agent and investment adviser to State Farm Associates' Funds Trust, State Farm Variable Product Trust, and State Farm Mutual Fund Trust, three Delaware Business Trusts that are registered investment companies under the Investment Company Act of 1940. Auto Company also sponsors two qualified retirement plans for the benefit of its employees, which plans are named the State Farm Insurance Companies Employee Retirement Trust and the State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees (collectively the "Qualified Plans").

As part of its corporate structure, Auto Company has established an Investment Department. The Investment Department is directly or indirectly responsible for managing or overseeing the management of the investment and reinvestment of assets owned by each person that has joined in filing this Schedule 13G. Moreover, the Investment Department is responsible for voting proxies or overseeing the voting of proxies related to issuers the shares of which are held by one or more entities that have joined in filing this report. Each insurance company included in this report and SFIMC have established an Investment Committee that oversees the activities of the Investment Department in managing the firm's assets. The Trustees of the Qualified Plans perform a similar role in overseeing the investment of each plan's assets.

Pursuant to Rule 13d-4 each person listed in the table below expressly disclaims "beneficial ownership" as to all shares as to which such person has no right to receive the proceeds of sale of the security and disclaims that it is part of a "group".

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Name	Classification Under Item 3	
State Farm Mutual Automobile Insurance Compar	ny IC	3,180,145 shares
State Farm Life Insurance Company	IC	957 , 766 shares
State Farm Fire and Casualty Company	IC	146,400 shares
State Farm Investment Management Corp.	IA	0 shares
State Farm Associates Funds Trust - State		
Farm Growth Fund	IV	0 shares
State Farm Associates Funds Trust - State		
Farm Balanced Fund	IV	0 shares
State Farm International Life Insurance		

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Company Ltd.	IV	0 shares
State Farm Insurance Companies Employee		
Retirement Trust	EP	1,235,766 shares
State Farm Insurance Companies Savings and		
Thrift Plan for U.S. Employees	EP	
Equities Account		0 shares
Balanced Account		0 shares
State Farm Mutual Fund Trust	IV	0 shares
		5,520,077 shares