

NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

GARY E. JOHNSON
Governor
Jennifer A. Salisbury
Cabinet Secretary

September 25, 2000

Lori Wrotenbery
Director
Oil Conservation Division

OXY USA Inc. ATT: David Stewart P. O. Box 50250 Midland, TX 79710-0250

RE: Gas Wells Shut-In Pressure Exemption

Gentlemen:

In accordance with your request to have the wells listed below be exempted from their annual Gas Well Shut-In Pressure Test

State P	1-F 32-22-38	Tubb Oil & Gas (Pro Gas)
Brunson B	2-K 3-22-37	Blinebry Oil & Gas (Pro Gas)
Closson C	1-A 18-22-36	Jalmat Tansill Yates Seven Rivers (Pro Gas)
State N	5-M 2-22-36	Eumont Yates Seven Rivers Queen (Fro Gas)
Owen	2-O 35-21-37	Blinebry Oil & Gas (Pro Gas)
State D	6-F 32-21-36	Eumont Yates Seven Rivers Queen (Pro Gas)
State D	3-A 32-21-36	Eumont Yates Seven Rivers Queen (Pro Gas)
State D	1-B 32-21-36	Eumont Yates Seven Rivers Queen (Fro Gas)
Felton A	4-G 28-21-36	Eumont Yates Seven Rivers Queen (Pro Gas)
Felton	1-C 28-21-36	Eumont Yates Seven Rivers Queen (Pro Gas)
State C	5-M 16-21-36	Eumont Yates Seven Rivers Queen (Pro Gas)
State C	3-K 16-21-36	Eumont Yates Seven Rivers Queen (Pro Gas)
State E	5-N 30-19-37	Eumont Yates Seven Rivers Queen (Pro Gas)

The previous tests do not show sufficient reduction in production to be exempted from the annual required Gas Well Shut-In Pressure Test on each of the above wells. This notification for the request for exemption on these tests is denied.

Very truly yours,

OIL CONSERVATION DIVISION

Gary W. Wink

Field Representative II

GWW:nm

Submit 3 Copies To Appropriate District Office	State of New Mexico	_
D strict 1	Energy, Minerals and Natural Res	Form C-103
D strict II		WELL API NO.
8. I South First, Artesia, NM 87210 D strict III	SION 30-025 - 0571/3	
1 (00 Rio Brazos Rd., Aztec, NM 87410	5. Indicate Type of Lease	
D strict IV	STATE X FEE	
2040 South Pacheco. Santa Fe. NM 87505		6. State Oil & Gas Lease No.
SUNDRY NOTICES A	AND REPORTS ON WELLS	7 Leuca No.
(DO NOT USE THIS FORM FOR PROPOSALS T DIFFERENT RESERVOIR. USE "APPLICATION PF OPOSALS.)		7. Lease Name or Unit Agreement Name:
PF OPOSALS.)	FOR PERMIT" (FORM C-101) FOR SUCH	
1. Type of Well: Oil Well Gas Well Gas	State E	
2. Name of Operator	Other	
OXY USA Inc	16606	8. Well No.
3. Address of Operator	16696	5
P.O. BOX 5025	0 MIDLAND, TX 79710-0250	9. Pocl name or Wildcat
4. Well Location		Eumont Letes 7 Rux Qu (Gas)
Unit Letter N : 1070		
104	feet from the South lin	ne and 1504 feet from the West line
Section 30	Township 195 Range 3	
10.	Elevation (Show whether DR, RKB, F	RT GR etc.
NOTICE OF INTERIOR	riate Box to Indicate Nature of	Notice, Report or Other Data
DE SCODIA DEMONS	ION TO.	SUBSEQUENT REPORT OF:
_	S AND ABANDON REMED	DIAL WORK ALTERING CASING
TEMPORARILY ABANDON CHAI	NGE PLANS COMME	
PUBLIC OR ALTER OLD		ENCE DRILLING OPNS. PLUG AND
	DI ETIALI	TEST AND ABANDONMENT
	CEMEN	T JOB —
OTHER: GAS WELL SHUT-IN PRESSI	JRE EXEMPTION X OTHER:	· ·
of starting any proposed work) creating	itions. (Clearly state all pertinent deta	ails, and give pertinent dates, including estimated date
or recompilation.	ULE 1103. For Multiple Completion	ails, and give pertinent dates, including estimated date ns: Attach wellbore diagram of proposed completion
·		respond completion
OXY USA INC. RESPECT	FULLY REQUESTS AN EVENDET	ON TO RULE 40.2(A) FOR THE
ANNUAL SHUT-IN PRESS	URE TEST. THE NEED FOR THE RODUCTION THIS WELL WAS	ON TO RULE 40.2 (A) FOR THE
A POSSIBLE LOST OF P	RODUCTION. THIS WELL WAS	SHUT-IN AND TESTED LAGE
TEST WOULD BE CONDUCT	ELL BE SHUT-IN FOR ANY REP TED AT THE TIME	ASON, A SHUT-IN PRESSURE
	LED AT THE TIME.	
TEST DATE Alzilos	SIP 41	
CURRENT PROTECTION		
CURRENT PRODUCTION RAS		
GAS_	MCFD OIL O	BPD WATER BPD
I here by certify the the		
I here by certify that the information above is	true and complete to the best of my	knowledge and belief.
SIGNATURE .		•
	TITLE <u>REGULA</u>	TORY ANALYST DATE 9/15/00
Type or print name DAVID STE	WART	
(This space for State use)		Telephone No. 915-685-5717
APPPROVED BY		
Conditions of approval, if any	TITLE	DATE

Submit 3 Copies To Appropriate District C ffice		State of New 1	Mexico		
Energy, Minerals and Natural Resources 1525 N. French Dr., Hobbs, NM 87240					Form C-103 Revised March 25, 1999
Eistrict II 8 1 South First, Artesia, NM 87210	OIL CO	ONSERVATIO	ON DIVISION	WELL API N	0
Listrict III	312.00	2040 South Pa		5. Indicate Ty	30-025-05743
1000 Rio Brazos Rd., Aztec, NM 87410 District IV		Santa Fe, NM		STATE	
2(40 South Pacheco, Santa Fe, NM 87505		Sailta Fe, MM	8/303		& Gas Lease No.
SUNDRY NOT	ICES AND DEE	NO P. MO.		June On E	x Gas Lease No.
(LO NOT USE THIS FORM FOR PROPO D FFERENT RESERVOIR. USE "APPI	DSALS TO DRILL O	PORTS ON WEL	LS	7. Lease Name	e or Unit Agreement Name:
D. FFERENT RESERVOIR. USE "APPL. PLOPOSALS.)	ICATION FOR PER	MIT" (FORM C-101)	PLUG BACK TO A FOR SUCH		and rigicement Name:
1. Type of Well:				State	F-
Oil Well Gas Well	Other			State	—
2. Name of Operator	LES Outer				
3. Address of Operator	SA Inc.		16696	8. Well No.	
or operator					5
4. Well Location	X 50250 MID	LAND, TX 797	10-0250	9. Pool name of	or Wildcat
Won Education			· · · · · · · · · · · · · · · · · · ·	comon of	es TRux Qu (Gas)
Unit Letter W	1070 feet	from 4h - <	l		
	<u>19 – </u> icet i	.tom the	line and U	504feet fi	rom the West line
Section 30	Town	nship 195 R	Range 775	NII (D)	
	Elevation	(Show whether I	DR, RKB, RT. GR, etc.	NMPM	ea County
11 Charle					
NOTICE OF IN	ppropriate Bo	x to Indicate N	Vature of Notice, F	Report or Other	r Data
NOTICE OF IN PERFORM REMEDIAL WORK	IENTION TO) :	SUBS	SEQUENT RE	
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TEMPORARILY ABANDON	CHANGE PLAN	NS []	201415115	_	ACTERING CASING
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ON ALTER CASING	MULTIPLE		CASING TEST AN		ABANDONMENT L
OTHER CAR ATT	COMPLETION		CEMENT JOB	<u></u>	
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12. Describe proposed or complete	d operations (C		<u> </u>	10 months	
of starting any proposed work). or recompilation.	SEE RULE 110	3. For Multiple (Completions: Attach	wellhore diagram	. including estimated date
or recompliation.		•	i samo i inacii	wendore diagram	of proposed completion
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OXY USA INC. RES	SPECTFULLY R	EQUESTS AN I	EXEMPTION TO RU	JLE 402(A) F	OD THE
ANNUAL SHUT-IN I A POSSIBLE LOST	OF PROPERTY	T. THE NEED	D FOR THIS EXCE	PTION IS TO	AVOID
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TEST WOULD BE CO	NDUCTED AT	THE TIME	ANY REASON, A	SHUT-IN PRE	SSURE
		11111.			
TEST DATE 9/21/0	<u>X</u>	SIP_4			
CURRENT PRODUCTI	ON DAME				
		MCFD OIL	_	_	
		WCLD OIL	BPD_BPD	WATER_	BPD
					
I here by certify that the into-	1	###			
I here by certify that the information a	bove is true and	complete to the be	est of my knowledge:	and belief.	
SIGNATURE Van					•
Time		TITLE	REGULATORY AN	<u>ALYST</u>	DATE 9(15/00
Type or print name DAVI	D STEWART		Τ.	lanhar-M. C	
(This space for State use)			1 e	lephone No. 915-	-685-5717
APPPROVED BY					
Conditions of approval, if any		TITLE			DATE