

DISTRICT I

SIGNATURE (

TYPE OR PRINT NAME

P.O. Box 1980, Hobbs, F

DISTRICT II

811 Swith First St., Artesia, NM 88210 2835

DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410-1693 State of New Mexico Energy, Minerals and Natural Resources Department

## **OIL CONSERVATION DIVISION**

2040 S. Pacheco Santa Fe, New Mexico 87505-6429

APPLICATION FOR DOWNHOLE COMMINGLING

APPROVAL PROCESS:

X Administrative Hearing

**EXISTING WELLBORE** 

X\_ YES \_\_ NO

| CONOCO INC.   | 10 DESTA D  |  | DLAND, TX 79705-4500                             |  |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|--|--|--|
| WARREN UNIT   | 35 K-SEC  | 28-T20S-R38E   | LEA  |  |  |  |  |  |  |  |
| OGRID NO. 005073 Property Code 003122 API NO. 3002512400 Federal X , State , (and/or) Fee   |   |  |  |  |  |  |  |  |  |  |
| The following facts are submitted in support of downhole commingling:   | Upper<br>Zone   | Intermediate<br>Zone   | Lower<br>Zone                                    |  |  |  |  |  |  |  |
| Pool Name and     Pool Code   | WARREN UNIT BLINEBRY-<br>TUBB 69265   |  | WARREN UNIT DRINKARD<br>63080                    |  |  |  |  |  |  |  |
| Top and Bottom of<br>Pay Section (Perforations)   | 5791-6596'  |  | 6642-6784'                                       |  |  |  |  |  |  |  |
| 3. Type of production<br>(Oil or Gas)   | OIL   |  | OIL  |  |  |  |  |  |  |  |
| Method of Production     (Flowing or Artificial Lift)   | FLOWING   |  | FLOWING  |  |  |  |  |  |  |  |
| 5. Bottomhole Pressure  | a. (Current)  | <b>a.</b>  | 8.   |  |  |  |  |  |  |  |
| Oil Zones - Artificial Lift:<br>Estimated Current   | 901 ps1a  |  | 803 psia   |  |  |  |  |  |  |  |
| Estimated Current Gas & Oil - Flowing: Measured Current All Gas Zones:  | b. (Original)   | b.   | b.   |  |  |  |  |  |  |  |
| Estimated Or Measured Original  | est. 2600 psia  |  | est. 2700 psia                                   |  |  |  |  |  |  |  |
| 6. Oil Gravity ( <sup>°</sup> API) or<br>Gas BTU Content  | 39.4 API  |  | 39.6 API   |  |  |  |  |  |  |  |
| 7. Producing or Shut-In?  | PRODUCING   |  | PRODUCING  |  |  |  |  |  |  |  |
| Production Marginal? (yes or no)  | YES   | •  | YES  |  |  |  |  |  |  |  |
| If Shut-in, give date and oil/gas/<br>water rates of last production  Note: For new zones with no production history,   | Date:<br>Rates:   | Date:<br>Retes:  | Date:<br>Rates:                                  |  |  |  |  |  |  |  |
| Note: For new zones with no production history, applicant shall be required to attach production estimates and supporting data  1 If Producing, give date andoil/gas/water rates of recent test (within 60 days)  | Date: 6/96 Rates: 17 BOPD/ 1 BWPD 600 MCFD  | Date:<br>Rates:  | Date: 5/96<br>Rates: 12 BOPD/ 2 BWPD<br>500 MCFD |  |  |  |  |  |  |  |
| 8. Fixed Percentage Allocation<br>Formula -% for each zone  | Oil: 59 % 55 %  | Oil: Gas: %  | OII: 41 % Gas: 45 %                              |  |  |  |  |  |  |  |
| <ol> <li>If allocation formula is based upon something other than current or past production, or is based upon some other method, submit attachments with supporting data and/or explaining method and providing rate projections or other required data.</li> </ol>                                  |   |  |  |  |  |  |  |  |  |  |
| 10. Are all working, overriding, and royalty interests identical in all commingled zones?  If not, have all working, overriding, and royalty interests been notified by certified mail?  Have all offset operators been given written notice of the proposed downhole commingling?  Yes X No X Yes No |   |  |  |  |  |  |  |  |  |  |
| 11. Will cross-flow occur? Yes X No If yes, are fluids compatible, will the formations not be damaged, will any cross-flowed production be recovered, and will the allocation formula be reliable. Yes No (If No, attach explanation)   |   |  |  |  |  |  |  |  |  |  |
| 12. Are all produced fluids from all commingled zones compatible with each other? $\underline{x}$ Yes $\underline{x}$ No  |   |  |  |  |  |  |  |  |  |  |
| 13. Will the value of production be decreased by commingling? Yes X No (If Yes, attach explanation)   |   |  |  |  |  |  |  |  |  |  |
| 14. If this well is on, or communitized with, state or federal lands, either the Commissioner of Public Lands or the<br>United States Bureau of Land Management has been notified in writing of this application. X Yes No  |   |  |  |  |  |  |  |  |  |  |
| 5. NMOCD Reference Cases for F  | Rule 303(D) Exceptions:   | ORDER NO(S).   |  |  |  |  |  |  |  |  |
| * Production curve for<br>* For zones with no<br>* Data to support allo<br>* Notification list of al  | e to be commingled showing its<br>reach zone for at least one year<br>roduction history, estimated procation method or formula.<br>I offset operators,<br>rorking, overriding, and royalty<br>ments, data, or documents req | ar. (If not available, attach exp<br>oduction rates and supporting | olanation.)<br>data.                             |  |  |  |  |  |  |  |

I hereby certify that the information aboye is true and complete to the best of my knowledge and belief.

JERRY W. HOOVER

TITLE

Sr. Conservation Coordinator DATE 11-26-96

TELEPHONE NO. ( 915 ) 686-6548

## State of New Mexico gy, Minerals and Natural Resources Departme

Form C-102 Revised 1-1-89

## **OIL CONSERVATION DIVISION**

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410

## WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

| Operator   |                   |                      |                   | Lease             |                |                      |                  | Well No.                | <u> </u>         |  |  |  |
|--|-------------------|----------------------|-------------------|-------------------|----------------|----------------------|------------------|-------------------------|------------------|--|--|--|
| •  |                   |                      |                   |                   |                |                      |                  |                         |                  |  |  |  |
| Conoco Inc.  |                   |                      |                   |                   | rren-Bli       | nebry                |                  | <u> </u>                | 35               |  |  |  |
| Unit Letter Section  | 20.               | Township             |                   | Range             |                |                      | County           |                         |                  |  |  |  |
| v l  | 28                |                      | 205               | _                 | 3RF            | NMPM                 |                  | دما                     | •                |  |  |  |
| Actual Footage Location of   | Well:             |                      |                   |                   |                |                      |                  | <del></del>             |                  |  |  |  |
| _  |                   | C4.b                 | line and          |                   | 1000           | feet from            | the III.         | _ 4 1ino                |                  |  |  |  |
| 1880 feet fi<br>Ground level Elev.   | rom the           | South Brownstion     | TING SEET         | Pool              | 1980           | ice itolii           | <u>ملزا</u> the  | c t line Dedicated Acre | -300             |  |  |  |
| Citating leads thea.   | 11000011          | 5 . WILLIAM          |                   |                   |                |                      |                  | Decision Acc            | ongo.            |  |  |  |
| 3531   | Tubl              |                      |                   | Warren            | Tubb           |                      |                  | 40                      | Acres            |  |  |  |
| 1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.   |                   |                      |                   |                   |                |                      |                  |                         |                  |  |  |  |
| 2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).                                     |                   |                      |                   |                   |                |                      |                  |                         |                  |  |  |  |
| 3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.? |                   |                      |                   |                   |                |                      |                  |                         |                  |  |  |  |
| Yes  |                   |                      | uwer is "yes" ty  | pe of consolidati | OB             |                      |                  |                         |                  |  |  |  |
| If answer is "no"  | list the owner    | and tract descript   | tions which have  | actually been o   | onsolidated. ( | Use reverse side of  |                  |                         |                  |  |  |  |
| this form if seco  |                   |                      | ·                 | <u> </u>          |                |                      |                  |                         |                  |  |  |  |
| No allowable wi  | ll be assigned t  | o the well until all | interests have b  | ses consolidated  | (by communi    | tization, unitizatio | a, forced-poolis | ng, or otherwise)       |                  |  |  |  |
| or until a non-sti   | endard unit, eli: | ninsting such inte   | rest, has been ap | proved by the D   | ivision.       | •                    | •                |                         |                  |  |  |  |
|  |                   |                      |                   |                   |                |                      |                  |                         |                  |  |  |  |
|  | ī                 |                      |                   |                   | İ              |                      | OPERA:           | POR CERTIF              | ICATION          |  |  |  |
| ļ  | !                 |                      | 1                 |                   | !<br>!         | { }                  | I hereby         | certify that            | the information  |  |  |  |
|  | Į                 |                      | 1                 |                   | l              |                      | ontained here    | tin in true and         | complete to the  |  |  |  |
|  | 1                 |                      | 1                 |                   | ł              |                      |                  | vledge and belief.      |                  |  |  |  |
|  | i                 |                      | ŀ                 |                   | i              | 11                   |                  | •                       |                  |  |  |  |
|  | •                 |                      | 1                 |                   | \$<br>6        | ון ו                 | Signature        |                         |                  |  |  |  |
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|  | 1                 |                      | ļ                 |                   |                | 1 1-                 |                  | <del></del>             |                  |  |  |  |
| į  | i                 |                      | Į.                |                   | i              | [ ]                  | Printed Name     |                         |                  |  |  |  |
|  |                   |                      | <b>+</b> -        |                   | <del>-</del>   |                      | Jarry            | W Hoove                 | ٠,               |  |  |  |
| 1  | . !               | ***.                 | ŀ                 |                   | !              |                      | Position         |                         |                  |  |  |  |
|  | j                 |                      |                   |                   | !              |                      |                  |                         |                  |  |  |  |
|  | i                 |                      | 1                 |                   | 1              | 1 /2                 | <u>Sr. C</u>     | <u>onservati</u>        | on Coord.        |  |  |  |
|  | i                 |                      | 1                 |                   | 1              | 1 1                  | Company          |                         |                  |  |  |  |
|  | Ţ                 |                      | 1                 |                   | 1              | 1 L                  | Conoc            | o. Inc.                 |                  |  |  |  |
|  | 1                 |                      |                   |                   | j ·            | 1                    | Date             |                         |                  |  |  |  |
|  | 1                 |                      |                   |                   | ŧ              | 11                   | 03-30            | -92                     |                  |  |  |  |
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|  |                   |                      | <u> </u>          |                   | 1              | ] [                  | SURVE            | YOR CERTIF              | <b>TICATION</b>  |  |  |  |
|  | n t               |                      |                   |                   | 1              |                      |                  |                         |                  |  |  |  |
|  | F1                |                      | 11                |                   | 1              | [ ].                 | l hereby certi   | fo that the well        | location shown   |  |  |  |
|  | ii                |                      | 18                |                   | Ī              |                      |                  |                         | m field notes of |  |  |  |
|  | 1:                |                      | 1.                | •                 |                |                      |                  |                         | e or under my    |  |  |  |
| ,  | <u> </u>          |                      | 11                |                   | 1              |                      | supervison, a    | nd that the sai         | me is true and   |  |  |  |
| 1980   | 11                |                      | 1.                |                   |                |                      |                  |                         | knowledge and    |  |  |  |
|  | Ti                | <del>-&gt;</del> o   | 11                |                   | Ĭ              | i 1                  | belief.          | • •                     |                  |  |  |  |
|  | 1                 | lack                 | l!                |                   |                |                      | •                |                         |                  |  |  |  |
|  | 1!                | 1                    | 11                |                   | !              | 1 [                  | Date Surveyed    | 1                       |                  |  |  |  |
|  | <u> </u>          |                      | <u></u>           |                   | <b></b>        |                      |                  |                         |                  |  |  |  |
|  | T                 |                      | Τ                 |                   | 1              | -                    | Signature & S    | eal of                  |                  |  |  |  |
| }  | Ţ                 | 1                    | 1                 |                   | 1              | \ \                  | Professional S   | TEASAOL                 |                  |  |  |  |
|  | !                 | 18                   | 1                 |                   | !              |                      |                  | •                       |                  |  |  |  |
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|  | į                 | į                    | 1                 |                   | l              | [ ]                  | Certificate No.  | •                       |                  |  |  |  |
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| 0 330 660 990  | 1320 1650         | 1980 2310 2          | 640 20            | 00 1500           | 1000           | 500 0                |                  |                         |                  |  |  |  |

12 % Gas Decline 36 % Oil Decline Oil Rate (Calendar Day) (bbls) Gas Rate (Calendar Day) (Mscf) Water Rate (Calendar Day) (bbls) 10000 ∓ 100 + 10+

WELL: WARREN UNIT 35:BT

12 % Gas Decline 36 % Oil Decline 0.1 m 100 m Oil Rate (Calendar Day) (bbls) Gas Rate (Calendar Day) (Mscf) Water Rate (Calendar Day) (bbls) 10000 ∓ 1000 100 10+

WELL: WARREN UNIT 35:DR