

ABOVE THIS LINE FOR DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION
- Engineering Bureau -
1220 South St. Francis Drive, Santa Fe, NM 87505



ADMINISTRATIVE APPLICATION CHECKLIST

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

Application Acronyms:

[NSL-Non-Standard Location] [NSP-Non-Standard Proration Unit] [SD-Simultaneous Dedication]
[DHC-Downhole Commingling] [CTB-Lease Commingling] [PLC-Pool/Lease Commingling]
[PC-Pool Commingling] [OLS - Off-Lease Storage] [OLM-Off-Lease Measurement]
[WFX-Waterflood Expansion] [PMX-Pressure Maintenance Expansion]
[SWD-Salt Water Disposal] [IPI-Injection Pressure Increase]
[EOR-Qualified Enhanced Oil Recovery Certification] [PPR-Positive Production Response]

[1] **TYPE OF APPLICATION** - Check Those Which Apply for [A]

[A] Location - Spacing Unit - Simultaneous Dedication
☐ NSL ☐ NSP ☐ SD

Check One Only for [B] or [C]

[B] Commingling - Storage - Measurement
☐ DHC ☐ CTB ☐ PLC ☐ PC ☐ OLS ☐ OLM

[C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery
☐ WFX ☐ PMX ☒ SWD ☐ IPI ☐ EOR ☐ PPR

[D] Other: Specify _____

[2] **NOTIFICATION REQUIRED TO:** - Check Those Which Apply, or ☐ Does Not Apply

- [A] ☐ Working, Royalty or Overriding Royalty Interest Owners
- [B] ☒ Offset Operators, Leaseholders or Surface Owner
- [C] ☒ Application is One Which Requires Published Legal Notice
- [D] ☒ Notification and/or Concurrent Approval by BLM or SLO
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office
- [E] ☒ For all of the above, Proof of Notification or Publication is Attached, and/or,
- [F] ☐ Waivers are Attached

[3] **SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED ABOVE.**

[4] **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate** and **complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

BRIAN COLLINS
Print or Type Name

Signature

Operations Engineering Advisor
Title

Date

bcollins@concho.com
e-mail Address

10 Aug 2015



August 7, 2015

RECEIVED OOD

2015 08 17 P 3:18

New Mexico Oil Conservation Division
Attn: Phillip Goetze
1220 South St. Francis Drive
Santa Fe, NM 87505

RE: Application For Authorization To Inject
Tar Heel 16 State SWD #1
Township 20 South, Range 33 East, N.M.P.M.
Section 16: 1150' FSL & 1150' FEL
Lea County, New Mexico

Dear Mr. Goetze:

COG Operating LLC respectfully requests administrative approval for authorization to inject for the referenced well. Attached, for your review, is a copy of the C-108 application. Once we receive the newspaper publication and all certified return receipts, I will send you a copy.

Our geologic prognosis has the top of the Devonian at 14622' and Fusselman at 15022'. I'm permitting the injection interval a couple of hundred feet shallower and deeper than the prognosis just in case the formation tops are different than expected due to the lack of deep well control in this area. We will likely call TD about 1250' to 1500' below the actual top of the Devonian when we drill the well.

Please do not hesitate to contact me at (575) 748-6940 should you have any questions.

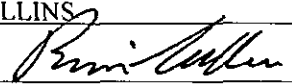
Sincerely,

A handwritten signature in cursive script, appearing to read "Brian Collins".

Brian Collins
Operations Engineering Advisor

BC/sw
Enclosures

APPLICATION FOR AUTHORIZATION TO INJECT

- I. PURPOSE: Secondary Recovery Pressure Maintenance X Disposal Storage
Application qualifies for administrative approval? X Yes No
- II. OPERATOR: COG Operating, LLC.
ADDRESS: 2208 West Main St, Artesia, NM 88210
CONTACT PARTY: BRIAN COLLINS PHONE: 575-748-6940
- III. WELL DATA: Complete the data required on the reverse side of this form for each well proposed for injection.
Additional sheets may be attached if necessary.
- IV. Is this an expansion of an existing project? Yes X No
If yes, give the Division order number authorizing the project: _____
- V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.
- VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.
- VII. Attach data on the proposed operation, including:
1. Proposed average and maximum daily rate and volume of fluids to be injected;
 2. Whether the system is open or closed;
 3. Proposed average and maximum injection pressure;
 4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and,
 5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).
- *VIII. Attach appropriate geologic data on the injection zone including appropriate lithologic detail, geologic name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such sources known to be immediately underlying the injection interval.
- IX. Describe the proposed stimulation program, if any.
- *X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division, they need not be resubmitted).
- *XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.
- XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water.
- XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.
- XIV. Certification: I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.
- NAME: BRIAN COLLINS TITLE: Operations Engineering Advisor
SIGNATURE:  DATE: 10 August 2015
E-MAIL ADDRESS: bcollins@concho.com
- * If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted. Please show the date and circumstances of the earlier submittal: _____

C-108 Application for Authorization to Inject
TAR HEEL 16 STATE SWD 1
1150' FSL, 1150' FEL
Unit P, Sec 16, T20S, R33E
Lea County, NM

COG Operating, LLC, proposes to drill the captioned well and make it into an open hole Devonian-Silurian-Ordovician SWD well from approximately 14,400' to 16,400'.

- V. Map is attached.
- VI. No wells within the ½ mile radius area of review penetrate the proposed injection zone.
- VII.
 - 1. Proposed average daily injection rate = 17,300 BWPD
Proposed maximum daily injection rate = 25,000 BWPD
 - 2. Closed system
 - 3. Proposed maximum injection pressure = 2880 psi
(0.2 psi/ft. x 14400' ft.)
 - 4. Source of injected water will be Delaware Sand, Bone Spring and Wolfcamp produced water. No compatibility problems are expected (we've seen no compatibility issues in other Devonian SWDs that take the same produced water as the proposed SWD well). Analyses of Delaware, Bone Spring and Wolfcamp waters are attached. There are no Devonian-Silurian-Ordovician receiving formation water analyses available in this area.
- VIII. The injection zone is the Devonian-Silurian-~~Ordovician~~ from 14400' to 16400' which is composed of porous limestone and dolomite. Any underground fresh water sources will be shallower than 1336' based on the top of the Rustler Anhydrite at approximately 1336'.
- IX. The Devonian-Silurian-Ordovician injection interval will be acidized with approximately 40,000 gals of 20% HCl acid.
- X. Well logs, if run, will be filed with the Division. There are no nearby well logs available for the Devonian-Silurian-Ordovician section.
- XI. There are no fresh water wells within a mile of the proposed SWD well.
- XII. After examining the available geologic and engineering data, no evidence was found of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water.
- XIII. Proof of Notice is attached.

III.

WELL DATA

INJECTION WELL DATA SHEET

OPERATOR: COG Operating, LLC

WELL NAME & NUMBER: Tar Heel 16 State SWD #1

WELL LOCATION: 1150' FSL 1150' FEL P 16 20s 33e

FOOTAGE LOCATION UNIT LETTER SECTION TOWNSHIP RANGE

WELLBORE SCHEMATICWELL CONSTRUCTION DATASurface Casing

Hole Size: 26" Casing Size: 20" e ± 1350'

Cemented with: - sx. or ± 4000 ft³

Top of Cement: Surface Method Determined: Design

Intermediate Casing

Hole Size: 17 1/2" Casing Size: 13 3/8" e ± 5500'

Cemented with: = sx. or ± 7500 ft³

Top of Cement: Surface ± 5000' Method Determined: Design

Production Casing

Hole Size: 8 1/2" Casing Size: 7" liner ± 10900-14400'

Cemented with: - sx. or ± 650 ft³

Top of Cement: Top of Liner Method Determined: Design

Total Depth: 16400'

Injection Interval

14400' feet to 16400'

(Perforated or Open Hole indicate which)

See Attached Schematic

INJECTION WELL DATA SHEET

Tubing Size: 4 1/2" Lining Material: Glassbore
Type of Packer: 10K CRA Permanent or 10K nickel plated double grip retrievable
Packer Setting Depth: ± 14350'
Other Type of Tubing/Casing Seal (if applicable): N/A

Additional Data

1. Is this a new well drilled for injection? X Yes _____ No

If no, for what purpose was the well originally drilled?

2. Name of the Injection Formation: Devonian - Silurian - Ordovician

3. Name of Field or Pool (if applicable): _____

4. Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail, i.e. sacks of cement or plug(s) used. *N/A*

5. Give the name and depths of any oil or gas zones underlying or overlying the proposed injection zone in this area:

Underlying: None

Overlying: Yates Seven Rivers \pm 2900-3475', Delaware \pm 5550-6600'

Bone Spring $\pm 8400 - 11000'$, Wolfcamp ± 11600

Atoka $\pm 13300-13350'$, Morrow $\pm 13300-13800'$

30-025-

Tar Heel 16 State SWD #1
1150' FSL, 1150' FEL
P-16-205-33e
Lea, NM

26"

20" / / /

@ ±1350' ±4000 CF Cmt

17 1/2"

TOC @ 5000' design

13 3/8" / / /

@ ±5500' ±7500 CF Cmt

12 1/4"

4 1/2" Inj. Tbg

8 1/2"

9 5/8" / / /

@ ±11100' ±2900 CF Cmt

6 1/8"

Inj Pkr @ ±14350'

7" / / /

Liner @ ±10900 - 14400' ±650 CF Cmt

Devonian/Silurian/~~Ordovician~~
OH Inj. Interval
14400 - 16400'

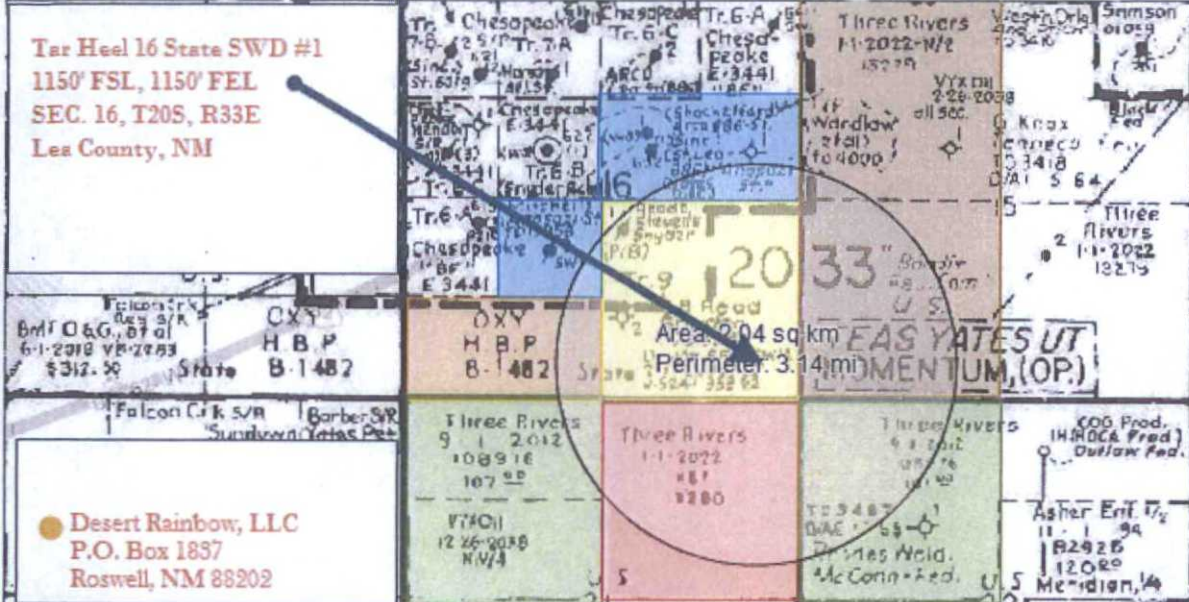
16400'

"Not To Scale"

V.

MAP

Tar Heel 16 State SWD #1
1150' FSL, 1150' FEL
SEC. 16, T20S, R33E
Les County, NM



● **Desert Rainbow, LLC**
 P.O. Box 1837
 Roswell, NM 88202

● **State of New Mexico**
 310 Old Santa Fe Trail
 Santa Fe, New Mexico 87504

● **Chevron USA Inc.**
 1400 Smith Street
 Houston, TX 77002

● **Chevron USA Inc.**
 3310 W Wall St
 Midland, TX 7970

● **Cross Border Resources, Inc.**
 McKinney Ave Suite 900
 Dallas, TX 75201

● **Larry Squires**
 11 Regency Square
 Hobbs, NM 88242

● **J.W. Neal**
 P.O. Box 278
 Hobbs, NM 88241

● **Oxy USA WTP, LP**
 P.O. Box 27570
 Houston, TX 77227

● **Apache Corporation**
 2000 Post Oak Blvd. Suite 100
 Houston, TX 77056

● **COG Acreage, LP**
 550 W Texas Suite 100
 Midland, TX 79701

● **Conoco Phillips Company**
 P.O. Box 7500
 Bartlesville, Oklahoma 74005

● **Sun Exploration & Production Company**
 P.O. Box 1830
 Houston, TX 77251

● **Chisos Ltd.**
 670 Dona Ana Rd. SW
 Deming, NM 88030

VI.

**No Wells Penetrate
Proposed Disposal
Interval Within Half
Mile Area of Review**

VII.

**Water Analyses
Produced Formation
Water**

**No Water Analysis
Receiving Formation
Water Is Available**

Injection Fluid Analyses

WATER SAMPLES REPRESENTATIVE OF WATER BEING INJECTED INTO THE PROPOSED SWD WELL												
Delaware												
2012103128	Gehrig	Fed #2	William D Polk	2/15/2012	1/10/2012	1.16	4.00	251245.24	6.47		25915.00	3525.76
2011128362	Sly Hawk State	1	William D Polk	9/28/2011	9/13/2011	1.17	4.06	256802.26	6.50		26180.00	4101.14
Bone Spring												
Lab Test #	Lease	Location	Salesman	Date Out	Sample Date	Specific Gravity	Ionic Strength	TDS	pH	conductivity	Ca (mg/L)	Mg (mg/L)
2012104723	Phantom 18 State	2H	William D Polk	2/29/2012	1/6/2012	1.09	2.23	136209.81	6.52		6156.63	1132.53
Wolfcamp												
Lab Test #	Lease	Location	Salesman	Date Out	Sample Date	Specific Gravity	Ionic Strength	TDS	pH	conductivity	Ca (mg/L)	Mg (mg/L)
2012105892	Augustus 10	1H		3/15/2012	3/8/2012	1.06	1.46	89771.55	6.60		3963.30	639.83
2011128833	Trail Boss 4	4H	William D Polk	9/30/2011	9/21/2011	1.05	1.31	78745.89	7.10		3143.00	406.00

81017.80	66969.32	1342.77	64.22	35.40	4.51	1492.00	24.27		122.00	0.00		450.00	151300.00	250.00	0.00
83379.63	62970.16	1133.12	38.78	20.06	1.64	905.03	9.33		73.00	0.00		70.00	161300.00	360.00	0.00
TH (CaCO3)	Na (mg/L)	K (mg/L)	Zn (mg/L)	Fe (mg/L)	Ba (mg/L)	Sr (mg/L)	Mn (mg/L)	Resistivity	HCO3 (mg/L)	CO3 (mg/L)	OH (mg/L)	SO4 (mg/L)	Cl (mg/L)	CO2 (mg/L)	H2S (mg/L)
20530.54	43509.27	957.44	0.00	28.72	0.00	414.86	1.36		159.00	0.00		850.00	83000.00	140.00	0.00
TH (CaCO3)	Na (mg/L)	K (mg/L)	Zn (mg/L)	Fe (mg/L)	Ba (mg/L)	Sr (mg/L)	Mn (mg/L)	Resistivity	HCO3 (mg/L)	CO3 (mg/L)	OH (mg/L)	SO4 (mg/L)	Cl (mg/L)	CO2 (mg/L)	H2S (mg/L)
13352.51	28320.32	350.70	0.00	17.85	1.77	707.79	0.00		220.00	0.00		950.00	54600.00	60.00	0.00
10421.23	27950.00	433.00		15.00	2.48	780.00	0.41		366.00	0.00		150.00	45500.00	140.00	0.00

X.

**No Nearby Logs Available For
Proposed Devonian Injection
Interval**

XI.

**No Fresh Water Wells
Within 1 Mile Radius**



New Mexico Office of the State Engineer
Active & Inactive Points of Diversion
(with Ownership Information)

No PODs found.

PLSS Search:

Section(s): 8, 9, 10, 15, 16, **Township:** 20S **Range:** 33E
17, 20, 21, 22



August 6, 2015

Hobbs News-Sun
P.O. Box 850
Hobbs, NM 88240

Re: Legal Notice
Salt Water Disposal Well
Tar Heel 16 State SWD #1

To Whom It May Concern:

Enclosed is a legal notice regarding New Mexico Oil Conservation Division C-108 Application for Authorization to Inject for a salt water disposal well.

Please run this notice and return the proof of notice to the undersigned at:

COG Operating LLC, 2208 W. Main St., Artesia, NM 88210

Sincerely,

A handwritten signature in cursive script, appearing to read "Brian Collins".

Brian Collins
Senior Operations Engineer

BC/sw
Enclosures

HOBBS NEWS SUN
LEGAL NOTICES

COG Operating LLC, 2208 W. Main Street, Artesia, NM 88210 has filed Form C-108 (Application for Authorization to Inject) with the New Mexico Oil Conservation Division seeking administrative approval for a salt water disposal well. The proposed well, the Tar Heel 16 State SWD No. 1, is located 1150' FSL & 1150' FEL, Section 16, Township 20 South, Range 33 East, Lea County, New Mexico. Disposal water will be sourced from area wells producing from the Delaware, Bone Spring and Wolfcamp formations. The disposal water will be injected into the Devonian/Silurian/Ordovician formation at a depth of 14,400' to 16,400' at a maximum surface pressure of 2880 psi and a maximum rate of 25,000 BWPD. The proposed SWD well is located approximately 31 miles west/northwest of Eunice. Any interested party who has an objection to this must give notice in writing to the Oil Conservation Division, 1220 S. St. Francis Drive, Santa Fe, New Mexico 87505, within fifteen (15) days of this notice. Any interested party with questions or comments may contact Brian Collins at COG Operating LLC, 2208 W. Main Street, Artesia, NM 88210, or call 575-748-6940.

Published in the Hobbs News Sun, Hobbs, New Mexico
_____, 2015.



August 7, 2015

New Mexico Oil Conservation Division
Attn: Phillip Goetze
1220 South St. Francis Drive
Santa Fe, NM 87505

RE: Application For Authorization To Inject
Tar Heel 16 State SWD #1
Township 20 South, Range 33 East, N.M.P.M.
Section 16: 1150' FSL & 1150' FEL
Lea County, New Mexico

Dear Mr. Goetze:

COG Operating LLC respectfully requests administrative approval for authorization to inject for the referenced well. Attached, for your review, is a copy of the C-108 application. Once we receive the newspaper publication and all certified return receipts, I will send you a copy.

Our geologic prognosis has the top of the Devonian at 14622' and Fusselman at 15022'. I'm permitting the injection interval a couple of hundred feet shallower and deeper than the prognosis just in case the formation tops are different than expected due to the lack of deep well control in this area. We will likely call TD about 1250' to 1500' below the actual top of the Devonian when we drill the well.

Please do not hesitate to contact me at (575) 748-6940 should you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Brian Collins".

Brian Collins
Operations Engineering Advisor

BC/sw
Enclosures



August 7, 2015

Oil Conservation Division
Attn: Paul Kautz
1625 North French Dr.
Hobbs, NM 88240

RE: Application For Authorization To Inject
Tar Heel 16 State SWD #1
Township 20 South, Range 33 East, N.M.P.M.
Section 16: 1150' FSL & 1150' FEL
Lea County, New Mexico

Dear Mr. Kautz:

COG Operating LLC respectfully requests administrative approval for authorization to inject for the referenced well. Attached, for your review, is a copy of the C-108 application. Once we receive the newspaper publication and all certified return receipts, I will send you a copy.

Our geologic prognosis has the top of the Devonian at 14622' and Fusselman at 15022'. I'm permitting the injection interval a couple of hundred feet shallower and deeper than the prognosis just in case the formation tops are different than expected due to the lack of deep well control in this area. We will likely call TD about 1250' to 1500' below the actual top of the Devonian when we drill the well.

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Sincerely,

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Brian Collins
Operations Engineering Advisor

BC/sw
Enclosures



August 7, 2015

State of New Mexico
310 Old Santa Fe Trail
Santa Fe, New Mexico 87504

RE: Application For Authorization To Inject
Tar Heel 16 State SWD #1
Township 20 South, Range 33 East, N.M.P.M.
Section 16: 1150' FSL & 1150' FEL
Lea County, New Mexico

To Whom It May Concern:

Enclosed for your review is a copy of COG Operating LLC's C-108 Application to Inject for the above referenced well. We plan to drill this well for SWD service if our C-108 is approved. As a requirement of the New Mexico Oil Conservation Division, we are notifying you because you have been identified as the surface owner or an operator within a half mile radius area of review. Any objections must be submitted in writing to NMOCD, 1220 S. St. Francis Drive, Santa Fe, New Mexico 87505. Objections must be received within fifteen (15) days of receipt of this letter.

Please do not hesitate to contact us at 575-748-6940 should you have any questions.

Sincerely,

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Brian Collins
Operations Engineering Advisor

BC/sw
Enclosures



August 7, 2015

Desert Rainbow, LLC
P.O. Box 1837
Roswell, NM 88202

RE: Application For Authorization To Inject
Tar Heel 16 State SWD #1
Township 20 South, Range 33 East, N.M.P.M.
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Brian Collins
Operations Engineering Advisor

BC/sw
Enclosures



August 7, 2015

Chevron USA Inc.
1400 Smith Street
Houston, TX 77002

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Tar Heel 16 State SWD #1
Township 20 South; Range 33 East, N.M.P.M.
Section 16: 1150' FSL & 1150' FEL
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Brian Collins
Operations Engineering Advisor

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August 7, 2015

Chevron USA Inc.
3310 W Wall St
Midland, TX 7970

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Brian Collins
Operations Engineering Advisor

BC/sw
Enclosures



August 7, 2015

Cross Border Resources, Inc.
Mckinney Ave Suite 900
Dallas, TX 75201

RE: Application For Authorization To Inject
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Township 20 South, Range 33 East, N.M.P.M.
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Brian Collins
Operations Engineering Advisor

BC/sw
Enclosures



August 7, 2015

Larry Squires
11 Regency Square
Hobbs, NM 88242

RE: Application For Authorization To Inject
Tar Heel 16 State SWD #1
Township 20 South, Range 33 East, N.M.P.M.
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Brian Collins
Operations Engineering Advisor

BC/sw.
Enclosures



August 7, 2015

J.W. Neal
P.O. Box 278
Hobbs, NM 88241

RE: Application For Authorization To Inject
Tar Heel 16 State SWD #1
Township 20 South, Range 33 East, N.M.P.M.
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Lea County, New Mexico

To Whom It May Concern:

Enclosed for your review is a copy of COG Operating LLC's C-108 Application to Inject for the above referenced well. We plan to drill this well for SWD service if our C-108 is approved. As a requirement of the New Mexico Oil Conservation Division, we are notifying you because you have been identified as the surface owner or an operator within a half mile radius area of review. Any objections must be submitted in writing to NMOCD, 1220 S. St. Francis Drive, Santa Fe, New Mexico 87505. Objections must be received within fifteen (15) days of receipt of this letter.

Please do not hesitate to contact us at 575-748-6940 should you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Brian Collins".

Brian Collins
Operations Engineering Advisor

BC/sw
Enclosures



August 7, 2015

Oxy USA WTP, LP
P.O. Box 27570
Houston, TX 77227

RE: Application For Authorization To Inject
Tar Heel 16 State SWD #1
Township 20 South, Range 33 East, N.M.P.M.
Section 16: 1150' FSL & 1150' FEL
Lea County, New Mexico

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Sincerely,

A handwritten signature in black ink, appearing to read "Brian Collins".

Brian Collins
Operations Engineering Advisor

BC/sw
Enclosures



August 7, 2015

Apache Corporation
2000 Post Oak Blvd. Suite 100
Houston, TX 77056

RE: Application For Authorization To Inject
Tar Heel 16 State SWD #1
Township 20 South, Range 33 East, N.M.P.M.
Section 16: 1150' FSL & 1150' FEL
Lea County, New Mexico

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Brian Collins
Operations Engineering Advisor

BC/sw
Enclosures



August 7, 2015

Conoco Phillips Company
P.O. Box 7500
Bartlesville, Oklahoma 74005

RE: Application For Authorization To Inject
Tar Heel 16 State SWD #1
Township 20 South, Range 33 East, N.M.P.M.
Section 16: 1150' FSL & 1150' FEL
Lea County, New Mexico

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Brian Collins
Operations Engineering Advisor

BC/sw
Enclosures



August 7, 2015

Sun Exploration & Production Company
P.O. Box 1330
Houston, TX 77251

RE: Application For Authorization To Inject
Tar Heel 16 State SWD #1
Township 20 South, Range 33 East, N.M.P.M.
Section 16: 1150' FSL & 1150' FEL
Lea County, New Mexico

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Brian Collins
Operations Engineering Advisor

BC/sw
Enclosures



August 7, 2015

Chisos Ltd.
670 Dona Ana Rd. SW
Deming, NM 88030

RE: Application For Authorization To Inject
Tar Heel 16 State SWD #1
Township 20 South, Range 33 East, N.M.P.M.
Section 16: 1150' FSL & 1150' FEL
Lea County, New Mexico

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Sincerely,

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Brian Collins
Operations Engineering Advisor

BC/sw
Enclosures

Jones, William V, EMNRD

From: Marissa Villa <MVilla@concho.com>
Sent: Monday, December 07, 2015 10:47 AM
To: Jones, William V, EMNRD
Subject: Tar Heel 16 State SWD #1
Attachments: Scanned from PRT01-ARW; Scanned from PRT01-ARW; Scanned from PRT01-ARW;
Scanned from PRT01-ARW; Scanned from PRT01-ARW; Scanned from PRT01-ARW;
Scanned from PRT01-ARW; Scanned from PRT01-ARW

Importance: High

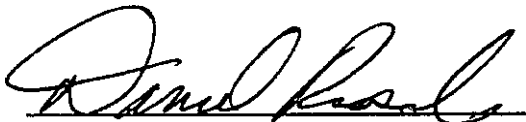
CONFIDENTIALITY NOTICE: The information in this email may be confidential and/or privileged. If you are not the intended recipient or an authorized representative of the intended recipient, you are hereby notified that any review, dissemination or copying of this email and its attachments, if any, or the information contained herein, is prohibited. If you have received this email in error, please immediately notify the sender by return email and delete this email from your system. Thank you.

Affidavit of Publication

STATE OF NEW MEXICO
COUNTY OF LEA


I, Daniel Russell, Publisher of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, solemnly swear that the clipping attached hereto was published in the regular and entire issue of said newspaper, and not a supplement thereof for a period of 1 issue(s).

Beginning with the issue dated
August 11, 2015
and ending with the issue dated
August 11, 2015.



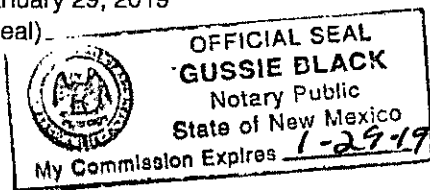
Publisher

Sworn and subscribed to before me this
11th day of August 2015.



Business Manager

My commission expires
January 29, 2019
(Seal)



This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937 and payment of fees for said

LEGAL NOTICE

LEGAL NOTICE
August 11, 2015

COG Operating LLC, 2208 W. Main Street, Artesia, NM 88210 has filed Form C-108 (Application for Authorization to Inject) with the New Mexico Oil Conservation Division seeking administrative approval for a salt water disposal well. The proposed well, the Tar Heel 18 State SWD No. 1, is located 1150' FSL & 1150' FEL, Section 18, Township 20 South, Range 33 East, Lea County, New Mexico. Disposal water will be sourced from area wells producing from the Delaware, Bone Spring and Wolfcamp formations. The disposal water will be injected into the Devonian/Silurian/Ordovician formation at a depth of 14,400' to 16,400' at a maximum surface pressure of 2880 psi and a maximum rate of 25,000 BWPD. The proposed SWD well is located approximately 31 miles west/northwest of Eunice. Any interested party who has an objection to this must give notice in writing to the Oil Conservation Division, 1220 S. St. Francis Drive, Santa Fe, New Mexico 87505, within fifteen (15) days of this notice. Any interested party with questions or comments may contact Brian Collins at COG Operating LLC, 2208 W. Main Street, Artesia, NM 88210, or call 575-748-8940. #30254

67112034

00161106

BRIAN COLLINS
COG OPERATING LLC
2208 W. MAIN ST.
ARTESIA, NM 88210

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Oxy USA WTP, LP
P.O. Box 27570
Houston, TX 77227
Tar 11eel 16 State SVD #1

2. Article Number
 (Transfer from service label)

7013 3020 0000 8748 8911

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

☐ Agent
☐ Address

B. Received by (Printed Name)

G. Meubora

C. Date of Delivery

8-17-15

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type

☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Apache Corporation
2000 Post Oak Blvd. Suite 100
Houston, TX 77056
Tar 11eel 16 State SVD #1

2. Article Number
 (Transfer from service label)

7013 3020 0000 8748 8928

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

☐ Agent
☐ Address

B. Received by (Printed Name)

Reel K. [Signature]

C. Date of Delivery

8-17-15

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type

☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

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☐ Yes

SENDER: COMPLETE THIS SECTION

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Desert Rainbow, LLC
P.O. Box 1837
Roswell, NM 88202
Tar 11eel 16 State SVD #1

2. Article Number
 (Transfer from service label)

7013 3020 0000 8748 8843

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

☐ Agent
☐ Address

B. Received by (Printed Name)

C. Date of Delivery

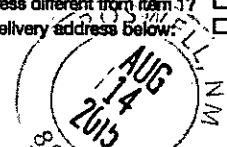
D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type

☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Chisos Ltd.
 670 Dona Ana Rd. SW
 Deming, NM 88030
Tar Heel 16 State SVD #1

2. Article Number
(Transfer from service label)

117013 3020 0000 8748 8959

PS Form 3811, July 2013

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Chevron USA Inc.
 1400 Smith Street
 Houston, TX 77002
Tar Heel 16 State SVD #1

2. Article Number
(Transfer from service label)

7013 3020 0000 8748 8867

PS Form 3811, July 2013

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

State of New Mexico
 310 Old Santa Fe Trail
 Santa Fe, New Mexico 87504
Tar Heel 16 State SVD #1

2. Article Number
(Transfer from service label)

7013 3020 0000 8748 8850

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

R. Smith
☒ Agent
☐ Address

B. Received by (Printed Name)

R. Smith

C. Date of Delivery

8-14-11

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X
☐ Agent
☐ Address

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

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☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Michael C. Lujan
☐ Agent
☐ Address

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

NEW MEXICO Oil Conservation Division
Attn: Phillip Goetze
1220 South St. Francis Drive
Santa Fe, NM 87505
Tar Heel 16 State SWD #1

2. Article Number
(Transfer from service label)

111 17013 3020 0000 8748 8829 111

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature <i>[Signature]</i>		<input type="checkbox"/> Agent <input type="checkbox"/> Address
B. Received by (Printed Name) Nikki B. Santa	C. Date of Delivery AUG 17 2015	
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No		
3. Service Type <input type="checkbox"/> Certified Mail* <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery		
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Oil Conservation Division
Attn: Paul Kautz
1625 North French Dr.
Hobbs, NM 88240
Tar Heel 16 State SWD #1

2. Article Number
(Transfer from service label)

111 17013 3020 0000 8748 8836 111

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature <i>[Signature]</i>		<input type="checkbox"/> Agent <input type="checkbox"/> Address
B. Received by (Printed Name) Kautz	C. Date of Delivery 8-17-15	
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No		
3. Service Type <input type="checkbox"/> Certified Mail* <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery		
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Conoco Phillips Company
P.O. Box 7500
Bartlesville, Oklahoma 74005
Tar Heel 16 State SWD #1

2. Article Number
(Transfer from service label)

7013 3020 0000 8748 8935

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ConocoPhillips		<input type="checkbox"/> Agent <input type="checkbox"/> Address
B. Received by (Printed Name) AUG 17 2015	C. Date of Delivery AUG 17 2015	
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No Bartlesville, OK		
3. Service Type <input type="checkbox"/> Certified Mail* <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery		
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		

Service TM

CERTIFIED MAIL RECEIPT

Domestic Mail Only; No Insurance Coverage Provided

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$

Certified Fee

(Endc
Rest
(Endc)

Total

Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Address</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p><i>Cross Border Resources, Inc.</i> <i>McKinney Ave Suite 900</i> <i>Dallas, TX 75201</i> <i>Tar Heel 16 State SWD #1</i></p>	<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p>
<p>2. Article Number (Transfer from service label)</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7013 3020 0000 8748 8881</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

CONCHO

2208 West Main Street
Artesia, New Mexico 88210

NIXIE

752011055-1N

08/2

RETURN TO SENDER
INSUFFICIENT ADDRESS
UNABLE TO FORWARD
RETURN TO SENDER

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Address</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;"><i>Larry Squires</i> 11 Regency Square Hobbs, NM 88242 Tar Heel 16 State SWD #1</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7013 3020 0000 8748 8898 11</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Address</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;"><i>J.W. Neal</i> P.O. Box 278 Hobbs, NM 88241 Tar Heel 16 State SWD #1</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7013 3020 0000 8748 8904 11</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Address</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;"><i>Chevron Corporation</i> 15 Smith Rd. Midland, TX 79705 Tar Heel 16 State SWD #1</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7013 3020 0000 8748 8966 11</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

U.S. Postal ServiceTM

CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information, visit our website at www.usps.com

OFFICIAL USE

8874



2208 West Main Street
Artesia, New Mexico 88210

*Chevron USA Inc.
3310 W Wall St
Midland, TX 7970*

CFS

*Chevron USA Inc.
3310 W Wall St
Midland, TX 7970
Tarheel 16 State SWD #1*

See Reverse for Instructions

NIXIE 797012007-1N 08/24/15

**RETURN TO SENDER
UNABLE TO FORWARD
UNABLE TO FORWARD
RETURN TO SENDER**

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

*Chevron USA Inc.
3310 W Wall St
Midland, TX 7970
Tarheel 16 State SWD #1*

2. Article Number
(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from Item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Certified Mail[®] ☐ Priority Mail Express[™]
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

7013 3020 0000 8748 8874

PS Form 3811, July 2013

Domestic Return Receipt

Jones, William V, EMNRD

From: Jones, William V, EMNRD
Sent: Thursday, September 03, 2015 2:35 PM
To: 'Brian Collins'; 'Marissa Villa'
Cc: Goetze, Phillip, EMNRD; McMillan, Michael, EMNRD; Dade, Randy, EMNRD; Holm, Anchor E.
Subject: Proposed SWD from COG Operating LLC: Tar Heel 16 State SWD #1 30-025-Pending 1150FSL/FEL P-16-20S-33E-Lea Open Hole Devonian 14400 to 16400

Hello Brian and Marissa,
I have this one evaluated and it looks cookie cutter good.

Have you gotten any protests?
Is there any Devonian/Silurian/Ordovician structure or expected productivity
.... or faults in the Paleozoic in this area?

Now I just need the mailers (with dates they went out) to all affected parties and a copy of the posting in the newspaper.
And, since it is in the middle of the Potash – we ask that you send proof of notice to the nearest Potash lessee.

Happy Labor Day!



William V. Jones, P.E., Engineer and District IV Supervisor
Oil Conservation Division <http://www.emnrd.state.nm.us/ocd/>
1220 South St. Francis Drive, Santa Fe, NM 87505
P: 505.476.3477 C: 505.419.1995

*Reminded again
12/3/15
Revised 12/7/15*

*Note
Not Logged in
as of 12/27/15
need status update
Will*

Jones, William V, EMNRD

From: Brian Collins <BCollins@concho.com>
Sent: Wednesday, December 16, 2015 3:32 PM
To: Jones, William V, EMNRD
Cc: Goetze, Phillip, EMNRD; McMillan, Michael, EMNRD; Dade, Randy, EMNRD; Holm, Anchor E.
Subject: RE: Proposed SWD from COG Operating LLC: Tar Heel 16 State SWD #1 30-025-Pending 1150FSL/FEL P-16-20S-33E-Lea Open Hole Devonian 14400 to 16400
Attachments: Tar Heel State SWD #1 Structure Map.pdf

Will:

I've attached a Devonian structure map prepared by our geology group. We're not on a structural closure, our geologist says faulting is not a concern here and there's no reason to believe the Devonian will be productive. Hope this is what you needed. Let me know if you need anything else. Thank you.

Brian Collins

Operations Engineering Advisor
NM Basin Team

COG OPERATING LLC
2208 W. Main Street
Artesia, New Mexico 88210-3720
Phone # 575.748.6924
Email: bcollins@concho.com



From: Jones, William V, EMNRD [mailto:WilliamV.Jones@state.nm.us]
Sent: Thursday, December 03, 2015 1:28 PM
To: Brian Collins; Marissa Villa
Cc: Goetze, Phillip, EMNRD; McMillan, Michael, EMNRD; Dade, Randy, EMNRD; Holm, Anchor E.
Subject: [External] RE: Proposed SWD from COG Operating LLC: Tar Heel 16 State SWD #1 30-025-Pending 1150FSL/FEL P-16-20S-33E-Lea Open Hole Devonian 14400 to 16400

**** External email. Use caution. ****

Hi Brian/Marissa,
Here is the Tar Heel questions.
I don't remember getting any reply back.

Take Care,
Will

From: Jones, William V, EMNRD
Sent: Thursday, September 03, 2015 2:35 PM
To: 'Brian Collins'; 'Marissa Villa'
Cc: Goetze, Phillip, EMNRD; McMillan, Michael, EMNRD; Dade, Randy, EMNRD; Holm, Anchor E.
Subject: Proposed SWD from COG Operating LLC: Tar Heel 16 State SWD #1 30-025-Pending 1150FSL/FEL P-16-20S-33E-Lea Open Hole Devonian 14400 to 16400

Hello Brian and Marissa,
I have this one evaluated and it looks cookie cutter good.

Have you gotten any protests?
Is there any Devonian/Silurian/Ordovician structure or expected productivity
.... or faults in the Paleozoic in this area?

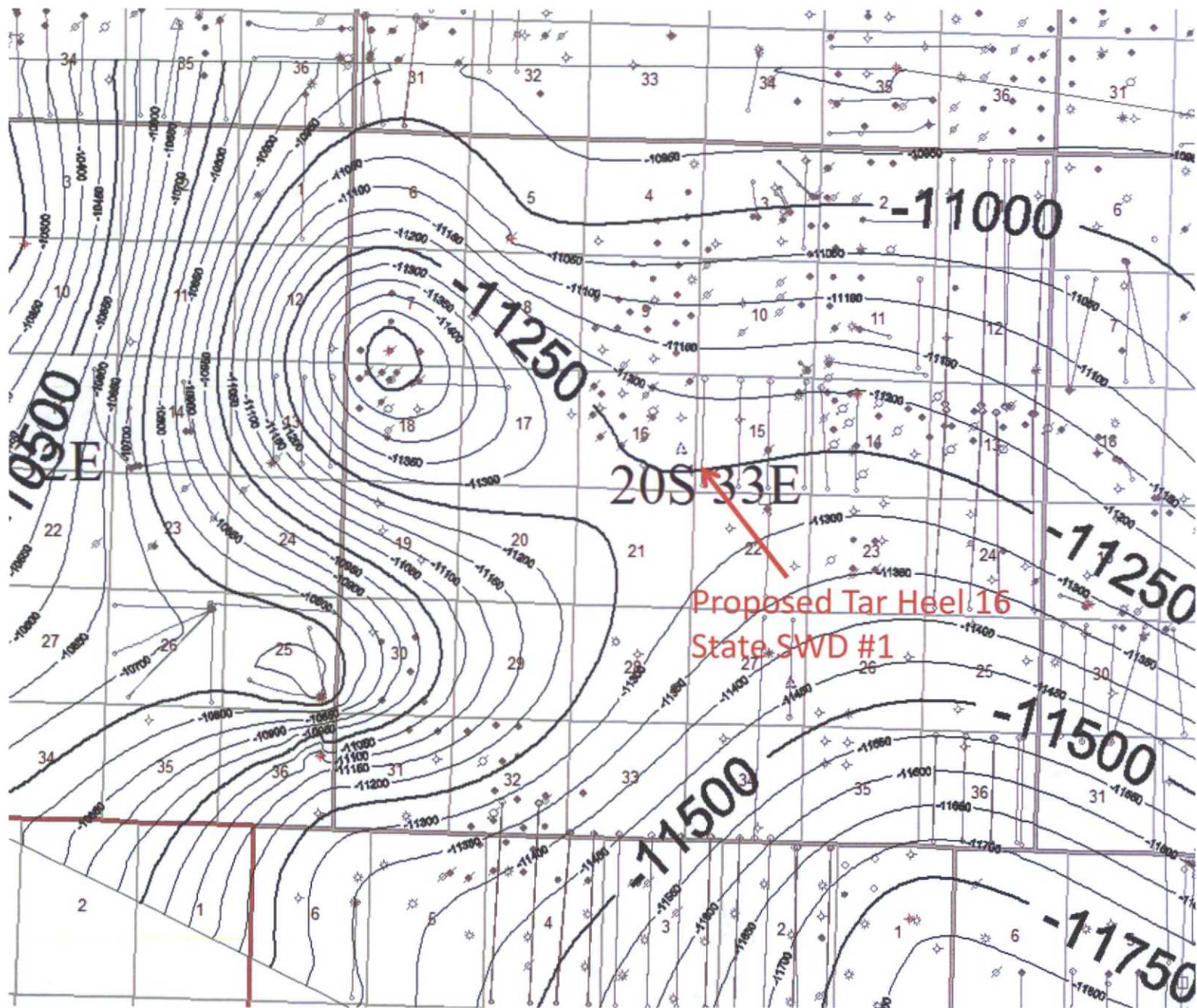
Now I just need the mailers (with dates they went out) to all affected parties and a copy of the posting in the newspaper.
And, since it is in the middle of the Potash – we ask that you send proof of notice to the nearest Potash lessee.

Happy Labor Day!



William V. Jones, P.E., Engineer and District IV Supervisor
Oil Conservation Division <http://www.emnrd.state.nm.us/ocd/>
1220 South St. Francis Drive, Santa Fe, NM 87505
P: 505.476.3477 C: 505.419.1995

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Jones, William V, EMNRD

From: Jones, William V, EMNRD
Sent: Monday, December 07, 2015 11:59 AM
To: 'Marissa Villa'
Subject: RE: Tar Heel 16 State SWD #1

Marissa,
I didn't see a notice to any Potash company.
Let me know?

Thank You,
Will

From: Marissa Villa [mailto:MVilla@concho.com]
Sent: Monday, December 07, 2015 10:47 AM
To: Jones, William V, EMNRD
Subject: Tar Heel 16 State SWD #1
Importance: High

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Jones, William V, EMNRD

From: Brian Collins <BCollins@concho.com>
Sent: Thursday, April 21, 2016 4:35 PM
To: Jones, William V, EMNRD; Goetze, Phillip, EMNRD
Cc: McMillan, Michael, EMNRD; Marissa Villa
Subject: RE: COG C108 Application for Tar Heel 16 State SWD 1 (Sec 16-20s-33e)

Will, Phillip:

Thanks for your quick response and your patience. I'll check and see if we sent the proof of notice for the potash. If not, we'll get it done and get it to you.

Brian

From: Jones, William V, EMNRD [mailto:WilliamV.Jones@state.nm.us]
Sent: Thursday, April 21, 2016 4:26 PM
To: Goetze, Phillip, EMNRD; Brian Collins
Cc: McMillan, Michael, EMNRD
Subject: [External] RE: COG C108 Application for Tar Heel 16 State SWD 1 (Sec 16-20s-33e)

**** External email. Use caution. ****

Brian

I think that one was pending notice to a potash lessee...I have emailed asking for that notice proof several times. For notice deficiency we don't log in. (I could be wrong can let you know next week.)

Will

Sent via the Samsung GALAXY S® 5, an AT&T 4G LTE smartphone

----- Original message -----

From: "Goetze, Phillip, EMNRD" <Phillip.Goetze@state.nm.us>
Date: 04/21/2016 4:17 PM (GMT-07:00)
To: Brian Collins <BCollins@concho.com>

Jones, William V, EMNRD

From: Marissa Villa <MVilla@concho.com>
Sent: Tuesday, May 03, 2016 10:21 AM
To: Jones, William V, EMNRD; Goetze, Phillip, EMNRD
Cc: Brian Collins
Subject: Tar Heel 16 State SWD
Attachments: Scanned from a Xerox Multifunction Device.pdf

Release 5/13

-----Original Message-----

From: prt02-aw@concho.com [mailto:prt02-aw@concho.com]
Sent: Tuesday, May 03, 2016 11:10 AM
To: Marissa Villa
Subject: Scanned from a Xerox Multifunction Device

Please open the attached document. It was scanned and sent to you using a Xerox Multifunction Device.

Attachment File Type: pdf, Multi-Page

Multifunction Device Location:

Device Name: prt02-aw

For more information on Xerox products and solutions, please visit <http://www.xerox.com> CONFIDENTIALITY NOTICE: The information in this email may be confidential and/or privileged. If you are not the intended recipient or an authorized representative of the intended recipient, you are hereby notified that any review, dissemination or copying of this email and its attachments, if any, or the information contained herein, is prohibited. If you have received this email in error, please immediately notify the sender by return email and delete this email from your system. Thank you.

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mosaic Potash
1361 Potash Mines RD
Carlsbad, NM 88210
Tar Heel 16 State SWD #1

2. Article Number
(Transfer from service label)

7013 3020 0000 8749 5001

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x

Linda S. Belger

☐ Agent☐ Addressee

B. Received by (Printed Name)

LINDA S. Belger

C. Date of Delivery

4-28-10

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☐ Certified Mail®☐ Priority Mail Express®☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes



C-108 Review Checklist: Received 8/17/15 Add. Request: _____ Reply Date: 4/28/16 Suspended: _____ [Ver 14]

PERMIT TYPE: WFX / PMX (SWD) Number: 1626 Permit Date: 5/13/16 Legacy Permits/Orders: _____

Well No: _____ Well Name(s): TAR HEEL 16 State SWD #1

API: 30-0 25-Pending Spud Date: (NOT SPUD) New or Old: _____ (UIC Class II Primacy 03/07/1982)

Footages 1150 FSL/FEL Lot _____ or Unit P Sec 16 Tsp 20S Rge 33E County LEA

General Location: 31 mi WNW of Eunice Pool: _____ Pool No.: _____

BLM 100K Map: _____ Operator: COG Operating LLC OGRID: 229137 Contact: Brian Collins

COMPLIANCE RULE 5.9: Total Wells: 3898 Inactive: 4 Fincl Assur: OK Compl. Order? _____ IS 5.9 OK? ✓ Date: 9/3/15

WELL FILE REVIEWED ○ Current Status: NOT Permitted

WELL DIAGRAMS: NEW: Proposed ○ or RE-ENTER: Before Conv. ○ After Conv. ○ Logs in Imaging: will be filed

Planned Rehab Work to Well: _____

Well Construction Details		Sizes (in) Borehole / Pipe	Setting Depths (ft)	Cement Sx or Cf	Cement Top and Determination Method
Planned <u>✓</u> or Existing _____ Surface		<u>26-20</u>	<u>1350</u>	<u>4000 fcs</u>	<u>CIRC</u>
Planned <u>✓</u> or Existing _____ Interm/Prod		<u>17 1/2-13 7/8</u>	<u>5500</u>	<u>7500 CF</u>	<u>CIRC (R-08)</u>
Planned <u>✓</u> or Existing _____ Interm/Prod		<u>12 1/4-9 5/8</u>	<u>11,100</u>	<u>2900 CF</u>	<u>5000</u>
Planned <u>✓</u> or Existing _____ Prod/Liner		<u>8 1/2-7"</u>	<u>10,900-14,400</u>	<u>6500 CF</u>	<u>TOIL</u>
Planned <u>✓</u> or Existing _____ Liner					
Planned <u>✓</u> or Existing <u>OH</u> PERF			<u>14,400-16,400 TD</u>	<u>2000</u>	

Injection Lithostratigraphic Units	Depths (ft)	Injection or Confining Units	Tops
Adjacent Unit: Litho. Struc. Por.		<u>Dev @ 14,622 (Eust @ 15,922)</u>	
Confining Unit: Litho. Struc. Por.			
Proposed Inj Interval TOP:	<u>14,400</u>	<u>DEV EUST</u>	
Proposed Inj Interval BOTTOM:	<u>16,400</u>	<u>12,700</u>	
Confining Unit: Litho. Struc. Por.			
Adjacent Unit: Litho. Struc. Por.			

Completion/Operation Details:	
Drilled TD _____	PBTD _____
NEW TD <u>16,400</u>	NEW PBTD _____
NEW Open Hole <u>○</u> or NEW Perfs <u>○</u>	
Tubing Size <u>4 1/2</u> in.	Inter Coated? <u>Slotted</u>
Proposed Packer Depth _____ ft	
Min. Packer Depth _____ (100-ft limit)	
Proposed Max. Surface Press. _____ psi	
Admin. Inj. Press. <u>2880</u>	(0.2 psi per ft)

AOR: Hydrologic and Geologic Information

POTASH: R-111-P ○ Noticed? ○ BLM Sec Ord ○ WAPP ○ Noticed? ○ SALT/SALADO T: _____ B: CLIFF HOUSE

FRESH WATER: Aquifer _____ Max Depth 1,336 HYDRO AFFIRM STATEMENT By Qualified Person ○

NMOSE Basin: CAPTAN REEF thru adj ○ NAO ○ No. Wells within 1-Mile Radius? ○ FW Analysis ○

Disposal Fluid: Formation Source(s) D.2L/BS/W.C. Analysis? _____ On Lease ○ Operator Only ○ or Commercial ○

Disposal Int: Inject Rate (Avg/Max BWPD): _____ Protectable Waters? _____ Source: _____ System: Closed ○ or Open ○

HC Potential: Producing Interval? _____ Formerly Producing? _____ Method: Logs/DST/P&A/Other _____ 2-Mile Radius Pool Map ○

AOR Wells: 1/2-M Radius Map? ✓ Well List? ✓ Total No. Wells Penetrating Interval: ○ Horizontals? ○

Penetrating Wells: No. Active Wells ○ Num Repairs? _____ on which well(s)? _____ Diagrams? _____

Penetrating Wells: No. P&A Wells ○ Num Repairs? _____ on which well(s)? _____ Diagrams? _____

NOTICE: Newspaper Date 8/9 Mineral Owner SLD Surface Owner SLD N. Date 8/7

RULE 26.7(A): Identified Tracts? ✓ Affected Persons: See LIST/Map N. Date 8/7

Permit Conditions: Issues: _____