#17

HAL J. RASMUSSEN OPERATING, INC.
SIX DESTA DRIVE, SUITE 2700
MIDLAND, TEXAS 79705
(915) 687-1664

OIL CONSERVATION DIVISION
RECEIVED
90 OCT 10 AM 9 13

October 3, 1990

Mr. William J. LeMay, Director
New Mexico Oil Conservation Division
P. O. Box 2088
Sante Fe, New Mexico 87501

RE: Administrative Approval of an Unorthodox Well Location
State "A" a/c 1 #54
Jalmat Gas Pool
Lea County, New Mexico

Dear Mr. LeMay,

Hal J. Rasmussen Operating Inc. respectfully requests administrative approval to recomplete the State A a/c 1 # 54 at an unorthodox well location , located 1980 ft FSL and 660 ft FEL of Section 24, T23S R36E, Lea County, New Mexico. The State "A" a/c 1 # 54 is currently TA'd in the Langlie Mattix Pool.

The offset operators have been notified of this application by certified mail. Copies of the return receipts will be forwarded when received. Attached is a plat showing the location of the State "A" a/c 1 #54, and the proration unit the well will be included in. A list of offset operators has also been attached.

If you need any further information regarding this request, please call me at (915) 687-1664.

Thank-you for your consideration.

Sincerely,

Jay Cherski

CC: New Mexico OIl Conservation Division District 1 Office
P.O. Box 1980
Hobbs, New Mexico 88240

Submit to Appropriate
District Office
State Lease - 4 copies
Fee Lease - 3 copies

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

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Form C-102
Revised 1-1-89

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator	Lease	Well No.
Hal J. Rasmussen Operating, Inc.	STATE "A" ACCOUNT 1	54

Unit Letter	Section	Township	Range	County
I	24	23S	36E NMPM	Lea

Actual Footage Location of Well:
660 feet from the EAST line and 1980 feet from the SOUTH line

Ground level Elev.	Producing Formation	Pool	Dedicated Acreage:
	YATES	Jalmat-TNSL-YTS-7R	480 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.

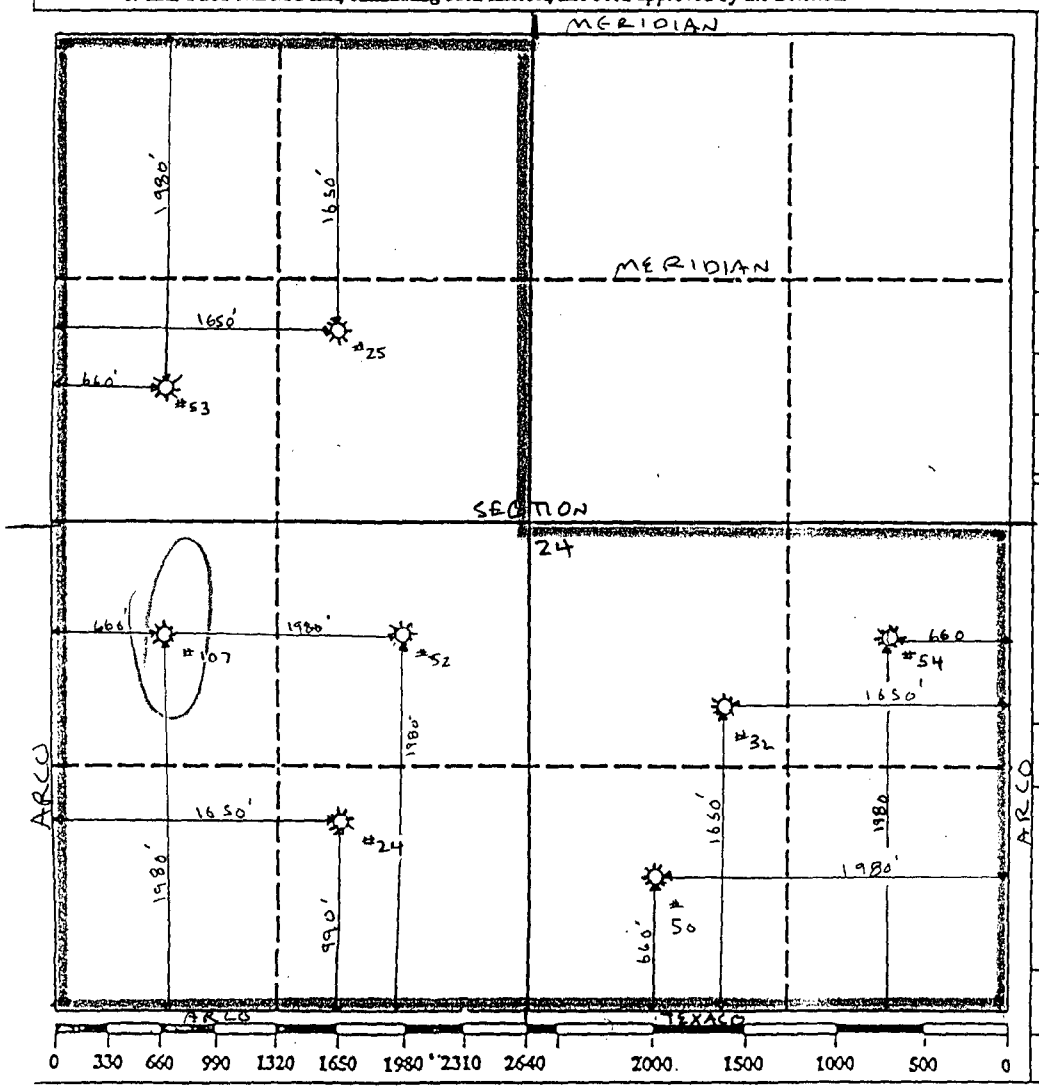
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

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 ☐ No If answer is "yes" type of consolidation _____

If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary. _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

I hereby certify that the information contained herein in true and complete to the best of my knowledge and belief.

Signature

Printed Name
Jay D. Cherski

Position
Agent

Company
Hal J. Rasmussen Operating, Inc

Date
10/3/90

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervison, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

Signature & Seal of
Professional Surveyor

Certificate No.

Offset Operators

Conoco
Mr. Hugh Ingram
P.O. Box 460
Hobbs, New Mexico 88240

Meridian
Mr. Jim Cramer
21 Desta Drive
Midland, Texas 79705

ARCO
P.O. Box 1610
Midland, Texas 79702
Attn: Kevin Renfro

Texaco
P.O. Box 728
Hobbs, New Mexico 88240
Attn: Mr. Russell Pool

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT
OIL CONSERVATION DIVISION
HOBBS DISTRICT OFFICE

OIL CONSERVATION DIVISION
RECEIVED
'90 OCT 12 AM 9 25

10-8-90

GARREY CARRUTHERS
GOVERNOR

POST OFFICE BOX 1980
HOBBS, NEW MEXICO 88241-1980
(505) 393-6161

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RE: Proposed:
MC_____
DHC_____
NSL X
NSP_____
SWD_____
WFX_____
PMX_____

Gentlemen:

I have examined the application for the:

Hal J. Rasmussen Operating Inc. State A A/C-1 #54-I 24-23-36
Operator Lease & Well No. Unit S-T-R

and my recommendations are as follows:

OK

Yours very truly,

Jerry Sexton
Supervisor, District 1

/ed

17

Memo

12/18/90

From

EVELYN DOWNS
Oil Conservation Staff Specialist

DIVISION

'90 DEC 19 AM 8 55

To Mike Stogner

Re: Hal J. Rasmussen Operating Inc.
State A A/c-1
State A A/c-2
State A A/c-3
Non-standard locations

The C-104's are being held on the following wells pending approval of the unorthodox locations, etc.

State A A/c-1 #103-N 11-23-36 --Buck sheet 10/9/90
well is producing

State A A/c1-1 #122-L 13-23-36 -- Buck sheet 10/9/90
well is producing

~~State A A/c-1 #54-I 24-23-36 --- buck sheet 10/8/ 90~~
~~well is producing~~ ?

State A A/c-2 #72-K 9-22-36 -- Buck sheet 10-8-90
well is producing

State A A/c-3 #5-G 10-23-36 -- buck sheet 11-8-90
well is producing

State A A/c-2 #33-O 5-22-36 -- buck sheet 10-9-90
well is producing

State A A/c-2 #67-K 9-22-36 -- buck sheet 10-10-90
well is producing

State A A/c-1 #45-H 4-23-36 -- need 320 ac NSP(N/2 sec4) reduced by deletion of Unit H which is dedicated to this oil well completion

If you do not have everything you need for these please let me know. Thanks for your help in this matter

Oil Conservation Division
PO Box 1980, Hobbs, New Mexico 88241-1980

Evelyn

HAL J. RASMUSSEN OPERATING, INC.
SIX DESTA DRIVE, SUITE 2700
MIDLAND, TEXAS 79705
(915) 687-1664

October 22, 1990

Mr. Michael E. Stogner
Chief Hearing Officer/Engineer
Oil Conservation Division
P.O. Box 2088
Santa Fe, New Mexico 87504

Dear Mr. Stogner:

Enclosed are certified mail return receipts for the unorthodox location applications recently submitted on the State A Account 1 #54, #57, #65, #103, #122, State A Account 2 #72, #52, #45, #29, #67, State A Account 3 #6.

If you have any questions or need any further information please call Jay Cherski at 915-687-1664. Thank you for your consideration in this manner.

Sincerely,

HAL J. RASMUSSEN OPERATING, INC.

Nona Hopkins

Nona Hopkins
Secretary

/nh

Enclosures

POOL/OPERATOR/LEASE/WELL	NUM	U	SE	TWN	RAN	STA	TRANS	ACREAGE	AF	DELIVER TEST	OCT-DEC 90 AVG MO SALES	D/P LIM	MAR 91 O/U	MAR 91 OLD O/P	MONTHLY ALLOWABLE
JALMAT TANSILL YT 7 RVRS (PRO GAS)															
HAL J. RASMUSSEN OPER. INC.															
STATE A AC 1															
	77	B	14	23S	36E	MWU	X C				9,301				
	71	M	13	23S	36E	MWU	X C				4,463				
	66	D	13	23S	36E	MWU	X C				14,707				
	75	F	13	23S	36E	MWU	X C				9,090				
	106	A	13	23S	36E	MWU	X C				1,885				
	P.U.	SUMMARY				M		640.00	4.00		48,007				48,007
	31	H	15	23S	36E	MWU	X C				5,672				
	33	F	15	23S	36E	MWU	X C				6,267				
	28	F	14	23S	36E	MWU	X C				3,535				
	102	D	14	23S	36E	MWU	X C				10,243				
	82	B	15	23S	36E	MWU	X C				9,286				
	P.U.	SUMMARY				M		480.00	3.00		35,003				35,003
	16	A	11	23S	36E	MWU	X C				3,758				
	29	C	11	23S	36E	MWU	X C				2,030				
	34	K	11	23S	36E	MWU	X C				3,628				
	62	B	11	23S	36E	MWU	X C				12,813				
	67	H	11	23S	36E	MWU	X C				13,057				
	99	E	11	23S	36E	MWU	X C				5,033				
	85	F	11	23S	36E	MWU	X C				2,079				
	103	N	11	23S	36E	MWU	X C								
	P.U.	SUMMARY				N		480.00	3.00		42,398	334,800	54,385-		54,900
	26	G	23	23S	36E	MWU	X C				734				
	27	F	23	23S	36E	MWU	X C				5,031				
	105	H	23	23S	36E	MWU	X C				6,108				
	98	B	23	23S	36E	MWU	X C				7,752				
	73	C	23	23S	36E	MWU	X C								
	84	G	23	23S	36E	MWU	X C				17,099				
	P.U.	SUMMARY				M		320.00	2.00		36,724				36,724
	24	N	24	23S	36E	MWU	X C								
	50	O	24	23S	36E	MWU	X C				14,034				
	32	J	24	23S	36E	MWU	X C				5,310				
	53	E	24	23S	36E	MWU	X C				6,497				
	107	L	24	23S	36E	MWU	X C				6,379				
	52	K	24	23S	36E	MWU	X C				11,207				
	126	C	24	23S	36E	MWU	X C								
	P.U.	SUMMARY				M		480.00	3.00		43,427				43,427
	35	L	3	23S	36E	MWU	X C				3,581				
	61	J	3	23S	36E	MWU	X C				7,388				
	30	I	3	23S	36E	MWU	X C				4,940				
	69	P	3	23S	36E	MWU	X C				11,543				
	48	N	3	23S	36E	MWU	X C				2,619				
	P.U.	SUMMARY				M		320.00	2.00		30,071				30,071
	18	M	4	23S	36E	MWU	X C				5,731				
	111	N	4	23S	36E	MWU	X C				3,728				
	P.U.	SUMMARY				M		440.00	2.75		9,459				9,459
	15	F	4	23S	36E	MWU	X C				3,533				
	23	B	4	23S	36E	MWU	X C				328				
	82	G	4	23S	36E	MWU	X C								

SENDER: Complete items 1, and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.
1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:
Meridian
attn: Jim Cramer
21 Dota Drive
Midland, Tx 79705

4. Article Number
P 046 612 024

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☑ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address (ONLY if requested and fee paid)

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery
10-9-90

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.
1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:
Lanford
attn: Robert Lanford
P.O. Box 1206
Jal, New Mexico

4. Article Number
P 046 612 020

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☑ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address (ONLY if requested and fee paid)

Signature — Address
Susan Chacon

Signature — Agent

Date of Delivery
10-9-90 vel

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

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1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:
Doyle Hartman
c/o Harold Swain
Drawer M.
Jal, New Mexico 88252

4. Article Number
P 046 612 028

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☑ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address (ONLY if requested and fee paid)

Signature — Address

Signature — Agent
Aubrey Waters

Date of Delivery
10-10-90

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

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1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:
Conoco
attn: Bob Kiker
10 Dota Drive
Midland, Tx 79705

4. Article Number
P 046 612 019

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☑ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address (ONLY if requested and fee paid)

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery
10-9-90

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

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1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:
Mahve
attn: K. A. Freeman
602 W. Industrial
Midland, Tx 79705

4. Article Number
P 046 612 022

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☑ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address (ONLY if requested and fee paid)

Signature — Address

Signature — Agent
Jeana Coombs

Date of Delivery
10-9-90

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

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1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:
Marathon
attn: W.O. Snyder
P.O. 552
Midland Tx 79702

4. Article Number
P 046 612 025

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☑ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address (ONLY if requested and fee paid)

Signature — Address

Signature — Agent
Tommy Edwards

Date of Delivery
OCT 9 1990

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

3 and 4.
t your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this rd from being returned to you. The return receipt fee will provide you the name of the person delivered and the date of delivery. For additional fees the following services are available. Consult postmaster fees and check box(es) for additional service(s) requested.
☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

Article Addressed to:	4. Article Number
Texaco Russel Pool P.O. Box 730 Hobbs, New Mexico 88240	P 046 612 021 Type of Service: ☐ Registered ☐ Insured ☑ Certified ☐ COD ☐ Express Mail ☑ Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
Signature — Address: S D [illegible] Signature — Agent Date of Delivery: 10-11-90	8. Addressee's Address (ONLY if requested and fee paid)

Form 3811, Mar. 1988 ★ U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
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☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

Article Addressed to:	4. Article Number
C. E. Long 301 N. Colorado Midland, Tx 79701	P 046 612 029 Type of Service: ☐ Registered ☐ Insured ☑ Certified ☐ COD ☐ Express Mail ☑ Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
Signature — Address Signature — Agent: Randy Biggs Ste. 160 Date of Delivery	8. Addressee's Address (ONLY if requested and fee paid)

orm 3811, Mar. 1988 ★ U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

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☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

Article Addressed to:	4. Article Number
Chevron attn: Al Bohling P.O. Box 1150 Midland Tx 79702	P 046 612 018 Type of Service: ☐ Registered ☐ Insured ☑ Certified ☐ COD ☐ Express Mail ☑ Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
Signature — Address Signature — Agent: L B Riggs Date of Delivery: OCT 9 1990	8. Addressee's Address (ONLY if requested and fee paid)

Form 3811, Mar. 1988 ★ U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

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1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:	4. Article Number
Grace Petroleum P.O. Drawer 2358 Midland, Tx 79702	P 046 612 027 Type of Service: ☐ Registered ☐ Insured ☑ Certified ☐ COD ☐ Express Mail ☑ Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X 6. Signature — Agent X [illegible] 7. Date of Delivery: OCT 9 1990	8. Addressee's Address (ONLY if requested and fee paid)

S Form 3811, Mar. 1988 ★ U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

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1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:	4. Article Number
Dallas McCasland c/o Oil Reports & Gas Services Inc P.O. Box 763 Hobbs, New Mexico 88240	P 046 612 026 Type of Service: ☐ Registered ☐ Insured ☑ Certified ☐ COD ☐ Express Mail ☑ Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X [illegible] 6. Signature — Agent X 7. Date of Delivery	8. Addressee's Address (ONLY if requested and fee paid)

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)
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3. Article Addressed to:	4. Article Number
Arco attn: Kevin Benfer P.O. Box 1610 Midland, Tx 79702	P 046 612 023 Type of Service: ☑ Registered ☐ Insured ☑ Certified ☐ COD ☐ Express Mail ☑ Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X 6. Signature — Agent X [illegible] 7. Date of Delivery: OCT 9 1990	8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988 ★ U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT