

PKRVD 300833534

WFX  
DRC 1/22/03

## PHOENIX HYDROCARBONS OPERATING CORPORATION

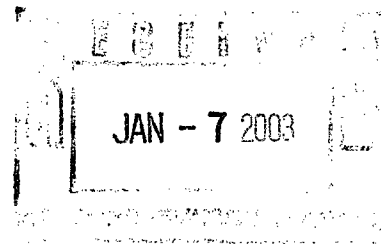
415 WEST WALL, SUITE 703  
MIDLAND, TX 79701

P. O. BOX 3638  
Midland, Texas 79702

Phone 915 686-9869  
FAX 915 686-7798

December 23, 2002

Mr. David Catanach  
New Mexico Oil Conservation Commission  
2040 South Pacheco Street  
Santa Fe, NM 87505



RE: LANGLEIE JAL UNIT WELL NO. 91  
1980' FSL & 1980' FEL  
SEC 17, T-25S, R-37E  
LEA COUNTY, NEW MEXICO

Gentlemen:

Phoenix Hydrocarbons Operating Corporation has taken over operations of the Langlie Jal Unit from Kenson Operating Company, effective October 1, 2002. Phoenix respectfully request permission to convert the referenced well to a injection well. Enclosed are the necessary forms, including Form C-108 with all its attachments and the sundry form describing our procedure.

We would appreciate your prompt attention, as we are anxious to perform this conversion.

The Langlie Jal Unit Well #87 is back on production and will not be an applicant for conversion at this time.

Yours truly,

PHOENIX HYDROCARBONS OPERATING CORPORATION

Phyllis R. Gunter

Prg

Attachments

Cc: Oil Conservation Commission  
P O Box 1980  
Hobbs New Mexico 88240

Offset Operators

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0135  
Expires November 30, 2000

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.*

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

1. Type of Well  
☐ Oil Well ☐ Gas Well ☒ Other Convert to injection well

2. Name of Operator  
Phoenix Hydrocarbons Operating Corp

3a. Address  
P O Box 3638, Midland, TX 79702

3b. Phone No. (include area code)  
915 686-9869

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
J, 1980' FSL & 1980' FEL  
Sec 17, T25S, R37E

5. Lease Serial No.  
NM 0140978

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.  
8910115870

8. Well Name and No.  
Langlie Jal Unit #91

9. API Well No.  
30-025-24891

10. Field and Pool, or Exploratory Area  
Langlie Mattix

11. County or Parish, State  
Lea County, NM

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input checked="" type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

- (1) Move in rig up.
- (2) Trip out production equipment.
- (3) Clean out to PBTD.
- (4) Trip in hole with injection packer to 3212.7'.
- (5) Circulate packer fluid and set injection packer.
- (6) Nipple up wellhead.
- (7) Place on injection.

NOTE: Start date will be immediately after approval.

14. I hereby certify that the foregoing is true and correct  
Name (Printed/Typed)

Phyllis R. Gunter

Title

Agent

Signature

Phyllis R. Gunter

Date

12-23-02

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**APPLICATION FOR AUTHORIZATION TO INJECT**

- I. PURPOSE:   X   Secondary Recovery            Pressure Maintenance            Disposal            Storage  
Application qualifies for administrative approval?   X   Yes            No
- II. OPERATOR:   PHOENIX HYDROCARBONS OPERATING CORPORATION    
ADDRESS:   P O Box 3638, Midland, Texas 79702    
CONTACT PARTY:   Chris Mitchell   PHONE:   894-1750 cell
- 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?   X   Yes            No  
If yes, give the Division order number authorizing the project:   R-4051, Nov 1970
- 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; Top side 500 - 1000 bbl/day
  2. Whether the system is open or closed; Closed
  3. Proposed average and maximum injection pressure; Top side 700 to 850 psi
  4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and, #2 WSW, analysis attached
  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.). Not for disposal purposes.
- \*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. Information previously furnished.
- IX. Describe the proposed stimulation program, if any. No stimulation will be required.
- \*X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division, they need not be resubmitted).  
Logging data previously furnished.
- \*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.  
A chemical analysis of water supply well #2 is attached.
- 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. The available geologic & engineering data has been examined  
no evidence of open faults or any other hydrologic connection between the
- XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form. (over)
- XIV. Proof of Notice attached  
Certification: I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

NAME:   Phyllis R. Gunter   TITLE:   Agent  

SIGNATURE:   Phyllis R. Gunter   DATE:   12-23-02  

- \* 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:   Nov 1970, R-4051

DISTRIBUTION: Original and one copy to Santa Fe with one copy to the appropriate District Office

## III. WELL DATA

A. The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include:

(1) Lease name; Well No.; Location by Section, Township and Range; and footage location within the section.

attached

(2) Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined.

attached

(3) A description of the tubing to be used including its size, lining material, and setting depth.

attached

(4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used.

attached

Division District Offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

B. The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.

(1) The name of the injection formation and, if applicable, the field or pool name.

Seven Rivers-Queen

(2) The injection interval and whether it is perforated or open-hole.

3255' to 3666'

(3) State if the well was drilled for injection or, if not, the original purpose of the well.

Producer

(4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations. None

(5) Give the depth to and the name of the next higher and next lower oil or gas zone in the area of the well, if any.

Above = Yates

Below == Greyburg

## XIV. PROOF OF NOTICE

Attached

All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location.

Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include:

(1) The name, address, phone number, and contact party for the applicant;

(2) The intended purpose of the injection well; with the exact location of single wells or the Section, Township, and Range location of multiple wells;

(3) The formation name and depth with expected maximum injection rates and pressures; and,

(4) A notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, 1220 South St. Francis Dr., Santa Fe, New Mexico 87505, within 15 days.

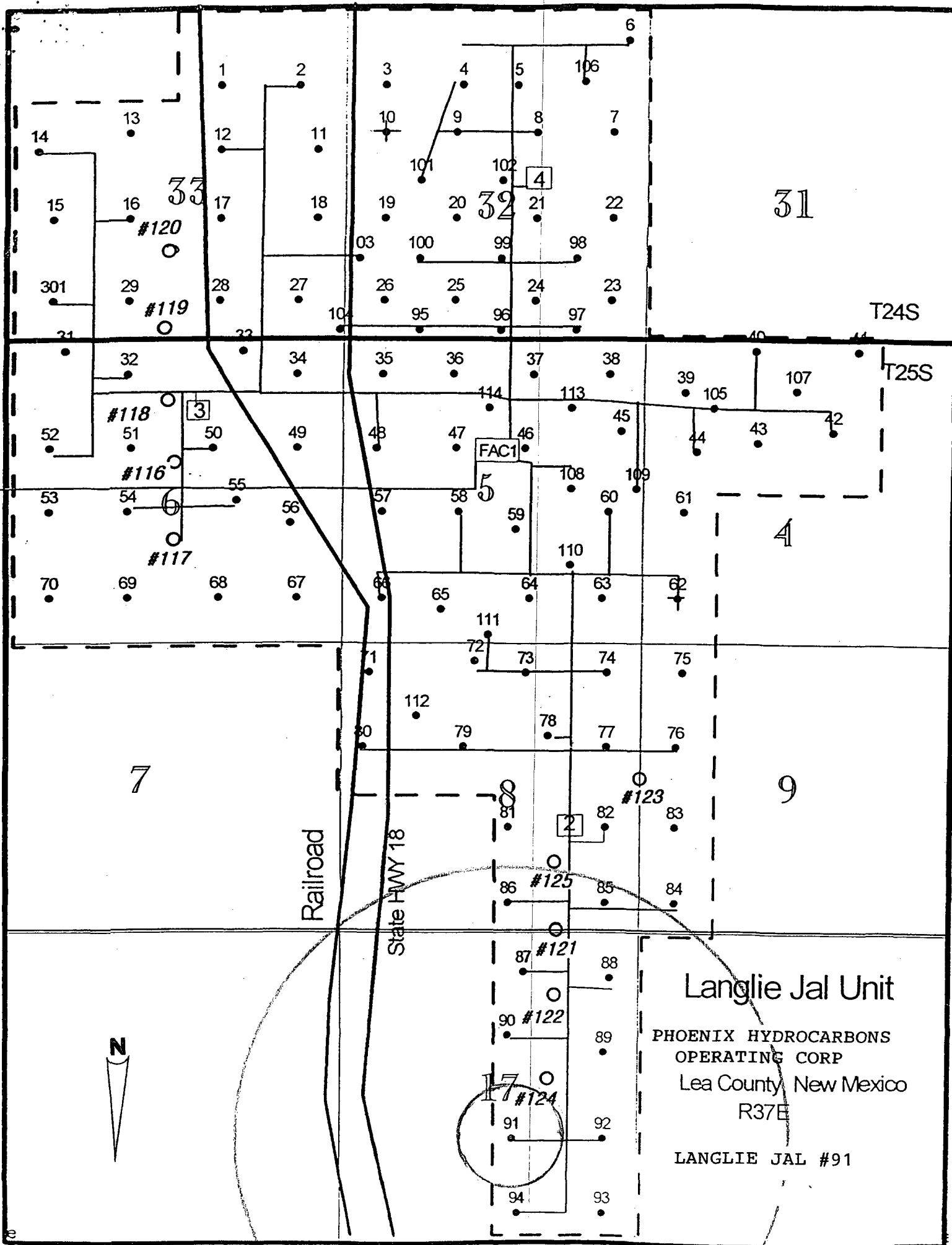
NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

PHOENIX HYDROCARBONS OPERATING CORPORATION  
P O BOX 3638  
MIDLAND, TEXAS

SUPPLEMENT TO FORM C-108  
APPLICATION FOR AUTHORIZATION TO INJECT

- III. WELL DATA: See attached well data sheets.
- V. Map attached.
- VI. N/A
- VII. Data on proposed operation:
1. Estimated average daily rate 500 bbls/day  
Estimated average daily volume 500 bbls/day  
Estimated maximum daily rate 1000 bbls/day  
Estimated maximum daily volume 1000 bbls/day
  2. The system is closed.
  3. Estimated average injection pressure 700 psi  
Estimated maximum injection pressure 850 psi
  4. Water from water supply well #2.
  5. Injection is not for disposal purposes.
- VIII. GEOLOGIC DATA ON THE INJECTION ZONE: The geologic name is the Seven Rivers-Queen and Grayburg, occurring around 3066' to 3582'. The Seven Rivers interval is composed of interbedded sandstone, siltstone and some dolomite. The Queen consists of siltstones and fine sandstones interbedded with silty dolomites. The predominant porosity in both Grayburg and Queen is of micro-intercrystalline type, some vuggy and fenestral pores also being present (Queen is about 45 ft thick). The Seven Rivers anhydrite (300 to 400 ft thick) forms the seal of the reservoir. The clastic portion of the Seven Rivers (an up to 100 ft thick arc of sandstone, siltstone, and dolomite cement) has predominately micro-crystalline and intercrystalline porosity. The Grayburg sediments (10 to 115 ft thick) consist of approximately equal amounts of clastics (mostly silt) and carbonates (90% dolomite).
- The Ogallala Aquifer (ground water) occurs approximately 206' below the surface to a depth of somewhere around 600'. The perforations that will be injected into occur 2,655' below.
- IX. Presently no stimulation is planned.
- X. Logging data previously furnished.
- XI. A chemical analysis of water supply well #2 is attached.



**Analytical Laboratory Report for:**

**Phinox HydroCarbon**



**BJ Unichem  
Chemical Services**

**UNICHEM Representative: Charles Vaden**

## **Production Water Analysis**

Listed below please find water analysis report from: LJU, WSW

**Lab Test No: 2002145884      Sample Date: 12/18/2002**

**Specific Gravity: 1.238**

**TDS: 366965**

**pH: 5.65**

<b>Cations:</b>	<b>mg/L</b>	<b>as:</b>
Calcium	1004	(Ca <sup>++</sup> )
Magnesium	998	(Mg <sup>++</sup> )
Sodium	171025	(Na <sup>+</sup> )
Iron	4.20	(Fe <sup>++</sup> )
Barium	0.00	(Ba <sup>++</sup> )
Strontium	45.30	(Sr <sup>++</sup> )
Manganese	0.48	(Mn <sup>++</sup> )
<b>Anions:</b>	<b>mg/L</b>	<b>as:</b>
Bicarbonate	488	(HCO <sub>3</sub> <sup>-</sup> )
Sulfate	4700	(SO <sub>4</sub> <sup>=</sup> )
Chloride	188700	(Cl <sup>-</sup> )
<b>Gases:</b>		
Carbon Dioxide	210	(CO <sub>2</sub> )
Hydrogen Sulfide	204	(H <sub>2</sub> S)

Phinox HydroCarbon

Lab Test No: 2002145884



**DownHole SAT™ Scale Prediction  
@ 100 deg. F**

Mineral Scale	Saturation Index	Momentary Excess (lbs/1000 bbls)
Calcite (CaCO <sub>3</sub> )	.146	-.0189
Aragonite (CaCO <sub>3</sub> )	.124	-.0229
Witherite (BaCO <sub>3</sub> )	0	-29.37
Strontianite (SrCO <sub>3</sub> )	.00108	-3.86
Magnesite (MgCO <sub>3</sub> )	.239	-.00865
Anhydrite (CaSO <sub>4</sub> )	1.23	59.98
Gypsum (CaSO <sub>4</sub> *2H <sub>2</sub> O)	.784	127.67
Barite (BaSO <sub>4</sub> )	0	-.348
Celestite (SrSO <sub>4</sub> )	.075	-271.47
Silica (SiO <sub>2</sub> )	0	-24.03
Brucite (Mg(OH) <sub>2</sub> )	< 0.001	-.135
Magnesium silicate	0	-74.4
Siderite (FeCO <sub>3</sub> )	.114	-.0289
Halite (NaCl)	1.45	20874
Thenardite (Na <sub>2</sub> SO <sub>4</sub> )	.00257	-86597
Iron sulfide (FeS)	1.15	2.15

**Interpretation of DHSat Results:**

The Saturation Index is calculated for each mineral species independently and is a measure of the degree of supersaturation (driving force for precipitation) under the conditions modeled. This value ranges from 0 to infinity with 1.0 representing a condition of equilibrium where scale will neither dissolve nor precipitate. Values less than 1.0 are undersaturated and values greater than 1.0 are supersaturated. The scale is logarithmic, i.e. a Saturation Index of 3 is 10 times more saturated than a value of 2.

The Momentary excess is a measure of how much scale would have to precipitate to bring the system back to a non-scaling condition. This value ranges from negative (dissolving) infinity to positive (precipitating) infinity. The Momentary Excess represents the amount of scale possible while the Saturation Level represents the probability that scale will form.



Supplemental to  
Application for Authorization to Inject into LJU #91  
AFFIDAVIT OF PUBLICATION

State of New Mexico,  
County of Lea.

I, KATHI BEARDEN

Publisher

of the Hobbs News-Sun, a  
newspaper published at  
Hobbs, New Mexico, do solemnly  
swear that the clipping attached  
hereto was published once a  
week in the regular and entire  
issue of said paper, and not a  
supplement thereof for a period.

of 1

weeks.

Beginning with the issue dated

December 10 2002

and ending with the issue dated

December 10 2002

Kathi Bearden

Publisher

Sworn and subscribed to before

me this 10th day of

December 2002

Jodi Iderson

Notary Public.

My Commission expires  
October 18, 2004  
(Seal)

This newspaper is duly qualified  
to publish legal notices or adver-  
tisements within the meaning of  
Section 3, Chapter 167, Laws of  
1937, and payment of fees for  
said publication has been made.

**LEGAL NOTICE**

**December 10, 2002**

Phoenix Hydrocarbons Operating Corp has submitted  
applications to the New Mexico Oil Conservation Commis-  
sion to convert to injection the following wells located in  
Lea County, New Mexico:

Langlie Jal Unit No. 91

1980' FSL & 660' FWL

Sec 17, T-24S, R-37E

Perf: 3291'-3447'

Langlie Jal Unit No. 87

660' FNL & 1980' FEL

Sec 17, T-25S, R-37E

Perf: 3294'-3550'

The above wells will be used to inject salt water into the  
Seven Rivers and Queen formation at perforated intervals  
above. Injection rate is estimated at a daily rate of 500 bar-  
rels with a maximum of 1000 barrels at an estimated injec-  
tion pressure of 700' psi not to exceed 850 psi, or not to ex-  
ceed formation fracture pressure.

Interested parties have 15 days from the date of this  
publication to file an objection or to request a hearing. Ob-  
jection may be filed by contacting the Oil Conservation  
Commission Division, 2040 South Pacheco Street, Santa  
Fe, NM 87505.

Applicant can be contacted by writing Phoenix Hydrocar-  
bons Operating Corporation, P O Box 3638, Midland,  
Texas 79705 or by calling Phyllis R. Gunter at 915-686-  
9869.

PHOENIX HYDROCARBONS OPERATING CORP

PHYLLIS R GUNTER

AGENT

#19445

02105941000

02561089

Phoenix Hydrocarbons Operating  
P. O. Box 3638  
MIDLAND, TX 79702

PHOENIX HYDROCARBONS  
P O BOX 3638  
MIDLAND, TEXAS 79702

OFFSET OPERATORS AND SURFACE OWNERS TO LANGLEIE JAL UNIT #91  
SUPPLEMENT TO FORM C-108

FOUR STAR OIL & GAS CO  
% CHEVRON USA INC  
ATTN: LAND MANAGER  
935 GRAVIER ST  
NEW ORLEANS, LA 70112

APCO OIL CORP  
210 PARK AVENUE  
1<sup>ST</sup> NATL BK BLDG  
OKLAHOMA CITY, OK 73101

ARCO OIL & GAS CO  
P O BOX 1610  
MIDLAND, TX 79702

AMERADA HESS  
P O BOX 2040  
TULSA OK 74102

DOYLE HARTMAN, INC  
P O BOX 10406  
MIDLAND, TEXAS 79702

SUNOCO EXPLORATION & PROD  
P O BOX 1861  
MIDLAND, TEXAS 79702

GULF OIL CORPORATION  
P O BOX 1150  
MIDLAND, TX 79702

EL PASO NATURAL  
ATTN: LAND MANAGER  
#9 GREENWAY PLAZA  
HOUSTON, TX 77046

WESTATES ITALO CO  
1504 ONE HOUSTON CENTER  
HOUSTON, TX 77010

SANTA FE ENERGY  
ONE SECURITY PARK  
7200 I-40 WEST  
AMARILLO, TX 79106

PHILLIPS PETROLEUM  
4001 PENBROOK  
ODESSA, TX 79762

MOBIL OIL CORPORATION  
P O BOX 1800  
HOBBS NM 88240

CONOCO, INC  
P O BOX 460  
HOBBS NM 88240

PETCO  
1100 1<sup>ST</sup> NATL BK BLDG  
HOUSTON, TX 77002

WOOLWORTH ESTATES  
% BOARD OF TRUSTEES  
BOX 178  
JAL NEW MEXICO 88252

J T CRAWFORD  
JAL NM 88252

HERMAN L LOEB  
P O BOX 524  
LAWRENCEVILLE, ILL 62439

PHOENIX HYDROCARBONS OPERATING CORPORATION

P O BOX 3638  
MIDLAND, TEXAS 79702

SUPPLEMENT TO FORM C-108  
APPLICATION FOR AUTHORIZATION TO INJECT

FIELD: LANGLIE MATTRIX

LEASE: LANGLIE JAL UNIT WELL NO: 91

DATE: 12/16/02 SPUDDED: 11/74 COMP: 12/20/74

ELEV: 3109.5 GL

LOCATION: 1980' FSL & 1980' FEL, J, SEC 17, T25S, R37E

LEA COUNTY NEW MEXICO

8 5/8", 24# csg at 814' w/600 sx Class C w/2% CaCl  
12 1/4" Hole TOC Surface

Perforations  
Injection Interval  
3255' to 3666'

4 1/4", 10.5# csg at 3850' w/1200 sx BJ Lo-Dense  
7 7/8" Hole TOC 650' FS

42' between Packer  
&  
top perf @ 3255'

BAKER 4 1/2"  
AD-1 I.P.C. PACKER  
SET @ 3212.70'

TOP PERF 3255'

TD 3850'

PBTD 3815'

Tubing size 103 2 3/8" jts (3212.7') I.P.C. tbg coated with scot coat 134

OTHER DATA:

1. Name of the injection formation: Seven Rivers-Queen
2. Name of Field or Pool (if applicable): Langlie-Matrix (Queen)
3. Is this a new well drilled for injection? No  
If no, for what purpose was the well originally drilled? Producing Oil Well
4. Has the well ever been perforated in any other zone? List all such perforated intervals and give plugging detail (sacks of cement or bridge plug used). No

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	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>1. Article Addressed to:</p> <p><b>FOUR STAR</b>  <b>935 BEAVER</b>  <b>NEW ORLEANS</b>  <b>70112</b></p>	<p>A. Signature X <i>Norman Adams</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Norman Adams</i> C. Date of Delivery <i>12/26/02</i></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>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	<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>1. Article Addressed to:</p> <p><b>ARCO Oil Corp</b>  <b>P O Box 1610</b>  <b>MIDLAND TX 79702</b></p>	<p>A. Signature X <i>Troy Hobbs</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Troy Hobbs</i> C. Date of Delivery <i>DEC 26 2002</i></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>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
2. Article Number (Transfer from service label) <b>7002 0460 0002 0064 2135</b>		2. Article Number (Transfer from service label) <b>7002 0460 0002 0064 2104</b>	
PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1035		PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1035	
<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>1. Article Addressed to:</p> <p><b>GULF Oil Corp</b>  <b>P O Box 1150</b>  <b>MIDLAND TX 79702</b></p>	<p>A. Signature X <i>John Bell</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>John Bell</i> C. Date of Delivery <i>12-26-02</i></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>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	<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>1. Article Addressed to:</p> <p><b>J T CRAWFORD</b>  <b>JAL NM</b>  <b>88252</b></p>	<p>A. Signature X <i>J. Crawford</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>J T Crawford</i> C. Date of Delivery <i>12-31-02</i></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>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
2. Article Number (Transfer from service label) <b>7002 0460 0002 0064 3729</b>		2. Article Number (Transfer from service label) <b>7002 0460 0002 0064 2203</b>	
PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1035		PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1035	
<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>1. Article Addressed to:</p> <p><b>HERMAN LOEB</b>  <b>P O Box 524</b>  <b>LAWRENCEVILLE IN</b>  <b>462439</b></p>	<p>A. Signature X <i>Herman Loeb</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Herman Loeb</i> C. Date of Delivery <i>12-26-02</i></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>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	<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>1. Article Addressed to:</p> <p><b>EL PASO</b>  <b>#9 BEVERLY PARK</b>  <b>HOUSTON TX 77046</b></p>	<p>A. Signature X <i>El Paso</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>El Paso</i> C. Date of Delivery <i>12-26-02</i></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>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
2. Article Number (Transfer from service label) <b>7002 0460 0002 0064 2081</b>		2. Article Number (Transfer from service label) <b>7002 0460 0002 0064 3736</b>	
PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1035		PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1035	

1-6-03

MR CATANACH,  
 ALL OF THE ABOVE COMPANIES AND THE TWO  
 ON THE ATTACHED SHEET HAVE RECEIVED AND ACCEPTED  
 PHOENIX INTENT TO INJECT.

SINCERELY,

*Phyllis A. Hunter*

## 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:

PHILLIPS  
4001 PEARSON  
00895 A Tr  
70962

2. Article Number

(Transfer from service label)

7002 0460 0002 0064 2166

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-11

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

*[Signature]* ☐ Agent ☐ Address

B. Received by (Printed Name)

C. Date of Delivery

12/27

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

3. Service Type

- ☒ Certified Mail ☐ Express Mail  
☐ Registered ☒ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

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:

WOOLWORTH  
Box 178  
JAL NM  
88252

2. Article Number

(Transfer from service label)

7002 0460 0002 0064 2111

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

*[Signature]* ☐ Agent ☐ Address

B. Received by (Printed Name)

C. Date of Delivery

12/26

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

3. Service Type

- ☒ Certified Mail ☐ Express Mail  
☐ Registered ☒ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

Wells in AOR	Typ	Stat	Cmpl	Cls	TVD	Dist	Latitude	Longitude
30-025-11631-00-00	G	A	S		2980	0	32.12923	-103.18333
30-025-34620-00-00	G	A	S		3080	0	32.1247	-103.18225
30-025-11630-00-00	I	A	S	2R	99999	0	32.132	-103.17802
30-025-11633-00-00	I	A	S	2R	99999	0	32.12469	-103.17799
30-025-11638-00-00	I	T	S	2R	3405	0	32.12924	-103.18553
30-025-11640-00-00	O	A	S		3403	0	32.13199	-103.18661
30-025-11641-00-00	O	A	S		3550	0	32.12561	-103.1855
30-025-11643-00-00	O	A	S		3565	0	32.1329	-103.18335
30-025-24891-00-00	O	A	S		3850	0	32.12833	-103.18227
30-025-11635-00-00	O	A	S		99999	0	32.12561	-103.18226
30-025-11636-00-00	O	A	S		99999	0	32.12832	-103.178
30-025-11637-00-00	O	A	S		3375	0	32.12924	-103.18979

**API Well No:** 30-025-24891-00-00 **Permit No**  
**Company Name:** KENSON OPERATING COMPANY INC  
**Location:** Sec: 17 T: 25S R: 37E Spot:  
**Lat/Long:** Lat: 32.12833 Long: -103.18227  
**Field Name:** LANGLEIE JAL UNIT  
**County Name:** Lea

**Well Name/No** LANGLEIE JAL UNIT

### String Information

String	Bottom (ft sub)	Diameter (Inches)	Weight (lb/ft)	Length (ft)
HOL1	814	8.625		
SURF	814	8.625	24	814
HOL3	3850	4.5		
PKR	3210	4.5		5
PROD	3850	4.5	10.5	3850
T1	3205	2.375		3205

Cement from 814 ft. to surface  
 Surface: 8.625 in. @ 814 ft.  
 Hole: 8.625 in. @ 814 ft.

### Cement Information

String	BOC (ft sub)	TOC (ft sub)	Class	Sacks
PROD	3850	0	C	1200
SURF	814	0	C	600

### Perforation Information

### Formation Information

St Code	Formation	Depth
---------	-----------	-------

Cement from 3850 ft. to surface  
 Packer: 4.5 in. @ 3210 ft.  
 Tubing: 2.375 in. @ 3205 ft.

Production: 4.5 in. @ 3850 ft.

Hole: 4.5 in. @ 3850 ft.

TD: TVD: 3850 PBTD: 0

# Comprehensive Well Report

## Report Description

This report lists all well construction and well history data stored in the system for a specified well. If a well has multiple sidetracks and completions, the report options allow for one or all sidetracks and completions to be listed for the wellbore.

**RBDMS Report Name:** rptWellComp, rptWellPool, rptWellCompBH, rptWellFormTops, rptWellStrings, rptWellStringPipe, rptCement, rptCementCls, rptWellPerfs, rptWellZones, rptWellZoneFmtn, rptGeoStimulations, rptWellLogs, rptWellHisty



API Well# 30-025-11638-00-00 Alt#1  
 Cnty Nm Lea  
 Operator 20989.00 SMITH & MARRS INC  
 OrgOp  
 Drillr  
 Well Nm & No SOUTH LANGLEIE JAL UNIT  
 Field # & Name 30978 . SOUTH LANGLEIE JAL UNIT  
 Basin  
 Dpst Fmtn  
 Pools 33820 JALMAT;TAN-YATES-7 RVRS (OI)

Alt#2

Alt#3

Type Injection - (All Types)  
 Catgry  
 Stats Temporarily Abandoned  
 Cmpl  
 OpWellNo  
 WlPermit  
 OrgTyp  
 OrgCat  
 Facility/Project# NA

Status Dt  
 Prmt App 7/1/2000  
 Prmt Exp  
 Spudded 9/26/1951  
 TD Rchd 12/31/9999  
 Cmpltd 1/1/1900  
 1st Prod 12/31/9999  
 1st Inj  
 PB Dt  
 P/A 12/31/9999

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Region Hobbs

Mult Lateral?

ELEVATION	Const	Meas	TVD
KB 0	Kickoff		
DF 0	Plug Back		0
Gr 3107	Hole		3405
Srf	Logger		3405

Surface Location

Slant

Source

Zone X Y 0 OrgX OrgY Lat 32.129240 Long -103.18553  
 Legal S: 17 T: 25S R: 37E

Footage Calls

Directions

DtComp Rpt Rec

DtEnd Confidntl

Surface Operator Private

Dir Survey

Run ☐Recvd ☐

Drilling Unit

Acres

Desc

Production

Class

Method Pumping

Frequency

Idle Rpt

Water Disposal

Method

API Wl#

Facility

Commingle

Dwn Hole ☐At Surf ☐

Dt Srf Apr

ISIP

Nat Prod ☐

Nat Treat

Oil

Gas

Brine

Mnrl Intrt Fed ☐ St ☐

Geologic Formation Tops

SmpRq? ☐OpnPit ☐H2S? ☐

Ref Top

Rig

## UIC Data

Revocation Dt

Hkup Insp Dt

UIC Permit R-4022

Commercial ☐

New/Converted

Class Enhanced Recovery  
 Injection Well

Compliance Review

Last

Result

Date Oper Notfd IMIT Requirement

Allowables

Rate

Inj Prs

0

Mechanical Integrity

Planning and Date Next  
 Tracking Info. Freq MIT Due

External MIT

Internal MIT

Recording

Mont Report

IMIT Req Tst Press

Next Insp

Annulus Pressure Monitoring

Dt Apprvd

Min. Req.

Typ Fluid

SG of Fluid

Water Analysis

Date

Inj Fld

SG Inj

Corr Inj

PH Inj

Continuation of Well 30-025-11638-00-00

Well Name SOUTH LANGLEIE JAL UNIT

## Boreholes, Strings, Equipment Specifications

Type	Diam	Top	Bot	Set Dt
HOL1	8.625	0	212	
SURF	8.625	0	212	
HOL2	5.5	0	2792	
PRO	5.5	0	2792	
T1	2.875	0	3145	
PKR	5.5	3145	3150	

## Specifications for Strings/Tubulars

Grade	Lgth	Wt	Cond	Taper
	212	24		
	2792	14		
	3145			
	5			

## Strings Cemented, Intervals, Dates

Bot	Top	Meth	Cemntd	Cono
2792	0			
212	0			

Wit	Inspector
<input type="checkbox"/>	
<input type="checkbox"/>	

Duration

## Cement &amp; Plug Desc Info

Cls	Sacks	Yield	Wght
C	400		
C	125		

## Completion Information for Screens, Open Hole, or Perforated Intervals

## Well-Specific Zones

## Zone Formations

## Well-Specific Stimulations

## Downhole Geophysical Logs, Drill Cores, Samples

## Well History

# Comprehensive Well Report

## Report Description

This report lists all well construction and well history data stored in the system for a specified well. If a well has multiple sidetracks and completions, the report options allow for one or all sidetracks and completions to be listed for the wellbore.

**RBDMS Report Name:** rptWellComp, rptWellPool, rptWellCompBH, rptWellFormTops, rptWellStrings, rptWellStringPipe, rptCement, rptCementCls, rptWellPerfs, rptWellZones, rptWellZoneFmtn, rptGeoStimulations, rptWellLogs, rptWellHisty

API Well# 30-025-11631-00-00 Alt#1  
 Cnty Nm Lea  
 Operator 192143.00 HERMAN L LOEB  
 OrgOp  
 Drillr  
 Well Nm & No LANGLEIE A FEDERAL  
 Field # & Name 28558 . LANGLEIE A FEDERAL  
 Basin  
 Dpst Fmtn  
 Pools 79240 JALMAT;TAN-YATES-7 RVRS (PR

Alt#2

Alt#3  
 Type Gas (Producing)  
 Catgry  
 Stats Active  
 Cmpl  
 OpWellNo  
 WlPermit  
 OrgTyp  
 OrgCat  
 Facility/Project# NA

Status Dt  
 Prmt App 4/1/1998  
 Prmt Exp  
 Spudded 5/25/1952  
 TD Rchd 12/31/9999  
 Cmpltd 1/1/1996  
 1st Prod 1/1/1900  
 1st Inj  
 PB Dt  
 P/A 12/31/9999

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Region Hobbs

Mult Lateral?

ELEVATION	Const	Meas	TVD
KB 0	Kickoff		
DF 0	Plug Back		0
Gr 3108	Hole		2980
Srf	Logger		2980

Surface Location

Slant

Zone X Y 0  
 Legal S: 17 T: 25S R: 37E

OrgX

OrgY

Source

Lat 32.129230

Long -103.18333

Footage Calls  
 Directions

DtComp Rpt Rec

DtEnd Confidntl

Surface Operator Federal

Dir Survey

Run ☐Recvd ☐

Drilling Unit

Acres

Desc

Production

Class

Method Pumping

Frequency

Idle Rpt

Water Disposal

Method

API Wl#

Facility

Commingled

Dwn Hole ☐At Surf ☐

Dt Srf Apr

ISIP

Nat Prod ☐

Nat Treat

Oil

Gas

Brine

Mnrl Intrt Fed ☐ St ☐

Geologic Formation Tops

SmpRq? ☐OpnPit ☐H2S? ☐

Ref Top

Rig

## UIC Data

Revocation Dt

Hkup Insp Dt

UIC Permit

Commercial ☐

New/Converted

Class

Compliance Review

Last

Result

Date Oper Notfd IMIT Requirement

Allowables

Rate

Inj Prs

Mechanical Integrity

Planning and

Tracking Info. Freq

Date Next

MIT Due

External MIT

Internal MIT

Recording

Mont Report

IMIT Req Tst Press

Next Insp

Annulus Pressure Monitoring

Dt Apprvd

Min. Req.

Typ Fluid

SG of Fluid

Water Analysis

Date

Inj Fld

SG Inj

Corr Inj

PH Inj

Continuation of Well 30-025-11631-00-00

Well Name LANGLEIE A FEDERAL

## Boreholes, Strings, Equipment Specifications

Type	Diam	Top	Bot	Set Dt
HOL1	9.625	0	289	
SURF	9.625	0	289	
HOL3	7	0	2821	
PRO	7	0	2821	
T1	2.375	0	2961	
PKR	7	2961	2966	

## Specifications for Strings/Tubulars

Grade	Lgth	Wt	Cond	Taper
	289	36		
	2821	20		
	2961			
	5			

## Strings Cemented, Intervals, Dates

Bot	Top	Meth	Cemntd	Cono
2821	0			
289	0			

Wit	Inspector
<input type="checkbox"/>	
<input type="checkbox"/>	

Duration

## Cement &amp; Plug Desc Info

Cls	Sacks	Yield	Wght
C	350		
C	140		

## Completion Information for Screens, Open Hole, or Perforated Intervals

## Well-Specific Zones

## Zone Formations

## Well-Specific Stimulations

## Downhole Geophysical Logs, Drill Cores, Samples

## Well History

# Comprehensive Well Report

## Report Description

This report lists all well construction and well history data stored in the system for a specified well. If a well has multiple sidetracks and completions, the report options allow for one or all sidetracks and completions to be listed for the wellbore.

**RBDMS Report Name:** rptWellComp, rptWellPool, rptWellCompBH, rptWellFormTops, rptWellStrings, rptWellStringPipe, rptCement, rptCementCls, rptWellPerfs, rptWellZones, rptWellZoneFmtn, rptGeoStimulations, rptWellLogs, rptWellHisty

API Well# 30-025-34620-00-00 Alt#1  
 Cnty Nm Lea  
 Operator 192143.00 HERMAN L LOEB  
 OrgOp 0.00  
 Drillr 0.00  
 Well Nm & No LANGLEIE A FEDERAL  
 Field # & Name 28558 . LANGLEIE A FEDERAL  
 Basin  
 Dpst Fmtn  
 Pools 79240 JALMAT;TAN-YATES-7 RVRS (PR

Alt#2

Alt#3  
 Type Gas (Producing)  
 Catgry  
 Stats Active  
 Cmpl  
 OpWellNo  
 WlPermit  
 OrgTyp  
 OrgCat  
 Facility/Project# NA

Status Dt  
 Prmt App 4/28/1999  
 Prmt Exp  
 Spudded 6/18/1999  
 TD Rchd 12/31/9999  
 Cmpltd 6/18/1999  
 1st Prod 7/22/1999  
 1st Inj  
 PB Dt  
 P/A 12/31/9999

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Surface Location

Slant

Region Hobbs

Mult Lateral?

ELEVATION	Const	Meas	TVD
KB 0	Kickoff		0
DF 0	Plug Back	0	0
Gr 3091	Hole	0	3080
Srf 0	Logger	0	

Source

Zone X 0 Y 0 OrgX 0 OrgY 0 Lat 32.124700 Long -103.18225  
 Legal S: 17 T: 25S R: 37E

Footage Calls  
 Directions

DtComp Rpt Rec DtEnd Confidntl Surface Operator Federal	Dir Survey Run <input type="checkbox"/> Recvd <input type="checkbox"/>	Drilling Unit Acres 0 Desc	Production Class Method Flowing	Frequency Idle Rpt 0	Water Disposal Method API Wl# Facility
Commingled Dwn Hole <input type="checkbox"/> At Surf <input type="checkbox"/> Dt Srf Apr	ISIP 0 Nat Prod <input type="checkbox"/> Nat Treat Oil 0 0 Gas 0 0 Brine 0 0	Mnrl Intrt Fed <input type="checkbox"/> St <input type="checkbox"/> Geologic Formation Tops	SmpRq? <input type="checkbox"/> OpnPit <input type="checkbox"/> H2S? <input type="checkbox"/>	Ref Top	Rig

## UIC Data

Revocation Dt  
 Hkup Insp Dt  
 UIC Permit  
 Commercial ☐  
 New/Converted  
 Class

Compliance Review Last Result Date Oper Notfd IMIT Requirement	Allowables Rate 0 Inj Prs 0	Mechanical Integrity Planning and Date Next Tracking Info. Freq MIT Due External MIT 0 Internal MIT 0 Recording 0 Mont Report IMIT Req Tst Press 0 Next Insp 0
Annulus Pressure Monitoring Dt Apprvd Min. Req. 0 Typ Fluid SG of Fluid 0	Water Analysis Date Inj Fld SG Inj 0 Corr Inj PH Inj 0	

Continuation of Well 30-025-34620-00-00

Well Name LANGLEIE A FEDERAL

## Boreholes, Strings, Equipment Specifications

## Specifications for Strings/Tubulars

Type	Diam	Top	Bot	Set Dt	Grade	Lgth	Wt	Cond	Taper
HOL1	8.625	0	640						
SURF	8.625	0	640			640	24		
T1	2.375	0	2813			2813			
PKR	4.5	2813	2818			5			
HOL2	4.5	0	3079						
PRO	4.5	0	3079			3079	10.5		

## Strings Cemented, Intervals, Dates

## Cement &amp; Plug Desc Info

Bot	Top	Meth	Cemntd	Cono	Wit	Inspector	Duration
3079	0				<input type="checkbox"/>		
640	0				<input type="checkbox"/>		

Cls	Sacks	Yield	Wght
C	650		
C	425		

## Completion Information for Screens, Open Hole, or Perforated Intervals

## Well-Specific Zones

## Zone Formations

## Well-Specific Stimulations

## Downhole Geophysical Logs, Drill Cores, Samples

## Well History



# Comprehensive Well Report

## Report Description

This report lists all well construction and well history data stored in the system for a specified well. If a well has multiple sidetracks and completions, the report options allow for one or all sidetracks and completions to be listed for the wellbore.

**RBDMS Report Name:** rptWellComp, rptWellPool, rptWellCompBH, rptWellFormTops, rptWellStrings, rptWellStringPipe, rptCement, rptCementCls, rptWellPerfs, rptWellZones, rptWellZoneFmtn, rptGeoStimulations, rptWellLogs, rptWellHisty

API Well# 30-025-24891-00-00 Alt#1

Alt#2

Alt#3

Cnty Nm Lea

Type Oil (Producing)

Operator 185433.00 KENSON OPERATING COMPANY INC, JOHN N F Catgry

OrgOp

Stats Active

Drillr

Cmpl

Well Nm &amp; No LANGLEIE JAL UNIT

OpWellNo

Field # &amp; Name 25415 . LANGLEIE JAL UNIT

WlPermit

Basin

OrgTyp

Dpst Fmtn

OrgCat

Pools 37240 LANGLEIE MATTIX;7 RVRS-Q-GRA

Facility/Project# NA

Status Dt

Prmt App 1/1/1975

Prmt Exp

Spudded 11/24/1974

TD Rchd 12/31/9999

Cmpltd 1/1/1975

1st Prod 1/1/1975

1st Inj

PB Dt

P/A 12/31/9999

Region Hobbs

Mult Lateral?

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ELEVATION	Const	Meas	TVD
KB 0	Kickoff		
DF 0	Plug Back	0	0
Gr 99999	Hole		3850
Srf	Logger	3850	

Surface Location

Slant

Zone X Y 0

OrgX

OrgY

Source

Lat 32.128330

Long -103.18227

Legal S: 17 T: 25S R: 37E

Footage Calls

Directions

DtComp Rpt Rec

DtEnd Confidntl

Surface Operator Private

Dir Survey

Run ☐Recvd ☐

Drilling Unit

Acres

Desc

Production

Class

Method Pumping

Frequency

Idle Rpt

Water Disposal

Method

API Wl#

Facility

Commingled

Dwn Hole ☐At Surf ☐

Dt Srf Apr

ISIP

Nat Prod ☐

Nat Treat

Oil

Gas

Brine

Mnrl Intrt Fed ☐ St ☐

Geologic Formation Tops

SmpRq? ☐OpnPit ☐H2S? ☐

Ref Top

Rig

## UIC Data

Revocation Dt

Hkup Insp Dt

UIC Permit

Commercial ☐

New/Converted

Class

Compliance Review

Last

Result

Date Oper Notfd IMIT Requirement

Allowables

Rate

Inj Prs

Mechanical Integrity

Planning and

Date Next

Tracking Info. Freq MIT Due

External MIT

Internal MIT

Recording

Mont Report

IMIT Req Tst Press

Next Insp

Annulus Pressure Monitoring

Dt Apprvd

Min. Req.

Typ Fluid

SG of Fluid

Water Analysis

Date

Inj Fld

SG Inj

Corr Inj

PH Inj

Continuation of Well 30-025-24891-00-00

Well Name LANGLIE JAL UNIT

## Boreholes, Strings, Equipment Specifications

Type	Diam	Top	Bot	Set Dt
HOL1	8.625	0	814	
SURF	8.625	0	814	
T1	2.375	0	3205	
PKR	4.5	3205	3210	
HOL3	4.5	0	3850	
PRO	4.5	0	3850	

## Specifications for Strings/Tubulars

Grade	Lgth	Wt	Cond	Taper
	814	24		
	3205			
	5			
	3850	10.5		

## Strings Cemented, Intervals, Dates

Bot	Top	Meth	Cemntd	Cono
3850	0			
814	0			

Wit	Inspector
<input type="checkbox"/>	
<input type="checkbox"/>	

Duration

## Cement &amp; Plug Desc Info

Cls	Sacks	Yield	Wght
C	1200		
C	600		

## Completion Information for Screens, Open Hole, or Perforated Intervals

## Well-Specific Zones

## Zone Formations

## Well-Specific Stimulations

## Downhole Geophysical Logs, Drill Cores, Samples

## Well History