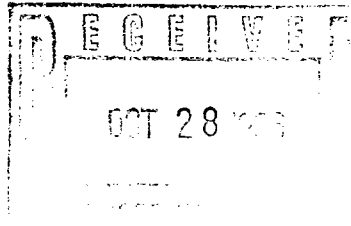


WFX 11/12/96  
695

**MEWBOURNE OIL COMPANY**

P. O. BOX 7698  
TYLER, TEXAS 75711  
(903) 561-2900  
FAX: (903) 561-1870



October 16, 1996

State of New Mexico  
Oil Conservation Division  
P. O. Box 2088  
Santa Fe, New Mexico 87504-2088

Re: Application for Administrative Approval for  
Authorization to Inject, Querecho Plains Queen  
Associated Sand Unit No. 6 and No. 13  
Lea County, New Mexico

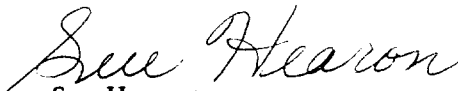
Dear Sirs:

Enclosed you will find our Application for Authorization to Inject along with all the necessary attachments. Affidavit of Publication for each well application is also enclosed along with copies of certified receipts for notification of surface owner and offset operator.

It is our understanding that these applications can be approved administratively if no objections have been received within fifteen (15) days of the date of publication, which was October 1, 1996.

Thank you for your help in this matter. If any other information is needed, please let me know at the phone number listed above.

Yours truly,

  
Sue Hearon  
Engineering Tech.

SH/hs

Enclosures: Applications for Authorization to Inject (QPQASU No. 6 and No. 13) with all  
attachments  
Affidavits of Publication (QPQASU No. 6 and 13)  
Copy of Certified Receipts and Return Receipt Cards

353,900

## APPLICATION FOR AUTHORIZATION TO INJECT

- I. Purpose: ☒ Secondary Recovery ☐ Pressure Maintenance ☐ Disposal ☐ Storage  
Application qualifies for administrative approval? ☒ yes ☐ no

II. Operator: Mewbourne Oil Company

Address: P. O. Box 7698 - Tyler, Texas 75711

Contact party: K. M. Calvert Phone: (903) 561-2900

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 ☐ no  
If yes, give the Division order number authorizing the project R-10151 - 777 PSI

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 geological data on the injection zone including appropriate lithologic detail, geological 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 source 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 source 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: K. M. Calvert

Title Eng. Mgr. - Sec. Rec.

Signature: K. M. Calvert

Date: 10/02/96

\* If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be duplicated and resubmitted. Please show the date and circumstance of the earlier submittal. VI., VIII, X. and XI. submitted in application Case No. 10960 dated 4/28/94 - Order No. 4-10151

DISTRIBUTION: Original and one copy to Santa Fe with one copy to the appropriate Division 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.
- (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.
- (3) A description of the tubing to be used including its size, lining material, and setting depth.
- (4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used.

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.
- (2) The injection interval and whether it is perforated or open-hole.
- (3) State if the well was drilled for injection or, if not, the original purpose of the well.
- (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.
- (5) Give the depth to and name of the next higher and next lower oil or gas zone in the area of the well, if any.

## XIV. PROOF OF NOTICE

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, P. O. Box 2088, Santa Fe, New Mexico 87501 within 15 days.

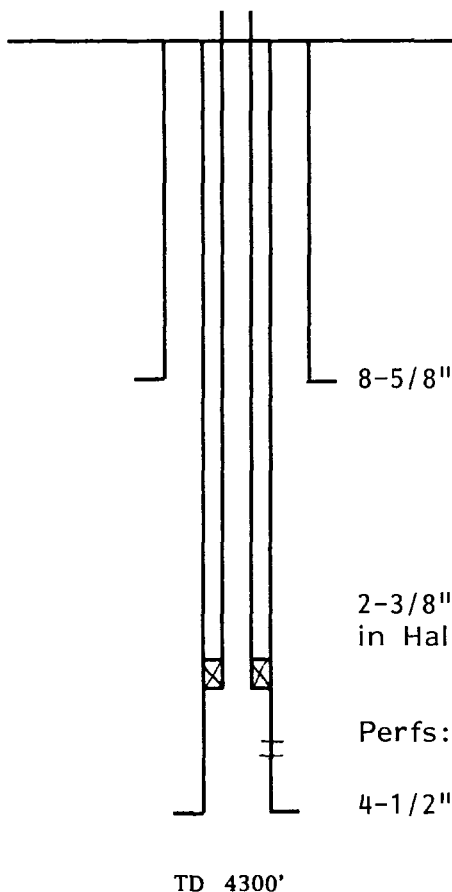
NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

---

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.

**Injection Well Data Sheet**

|  |   |                        |                        |                     |
|--|---|------------------------|------------------------|---------------------|
| <u>Mewbourne Oil Company</u><br>OPERATOR |   | <u>OPOASU</u><br>LEASE |                        |                     |
| <u>6</u><br>WELL NO.                     | <u>1650' FSL &amp; 330' FeL</u><br>FOOTAGE LOCATION | <u>22</u><br>SECTION   | <u>18S</u><br>TOWNSHIP | <u>32E</u><br>RANGE |

**Schematic****Tabular Data****Surface Casing**Size 8-5/8 " Cemented with 500 sx.T.O.C. Surface feet determined by circulationHole size 12-1/4"**Intermediate Casing**

Size \_\_\_\_\_ " Cemented with \_\_\_\_\_ sx.

T.O.C. \_\_\_\_\_ feet determined by \_\_\_\_\_

Hole size \_\_\_\_\_

**Long String**Size 4-1/2 " Cemented with 1000 sx.T.O.C. Surface feet determined by circulationHole size 7-7/8"

Total depth \_\_\_\_\_

Injection interval:

3881 feet to 4151 feet

(perforated) or open-hole, indicate which)

2-3/8" tubing set @ 3856'  
in Halliburton R-4 packerPerfs: 3881'-3916'  
4090'-4151'

4-1/2" csg. @ 4282'

TD 4300'Tubing size 2-3/8" lined with \_\_\_\_\_ set in a \_\_\_\_\_  
(material)Halliburton R-4 packer at 3856 feet  
(brand and model)

(or describe any other casing-tubing seal).

**Other Data**

- Name of the injection formation Queen
- Name of Field or Pool (if applicable) Querecho Plains Queen
- Is this a new well drilled for injection? ☐ Yes ☒ No  
If no, for what purpose was the well originally drilled? Producing oil well
- Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail (sacks of cement or bridge plug(s) used. No
- Give the depth to and name of any overlying and/or underlying oil or gas zones (pools) in this area. \_\_\_\_\_

T 185



MEWBOURNE OIL COMPANY  
V. ATTACHMENT TO FORM C-108

QUERRECHO PLAINS QUEEN ASSOCIATED  
UNIT NO. 6  
SEC. 22, T18S, R32E  
LEA COUNTY, NEW MEXICO

OCTOBER 1, 1996

ITEM VII OF NEW MEXICO OCD FORM C-108

DATA ON PROPOSED OPERATIONS  
QPQASU NO. 6  
LEA COUNTY, NEW MEXICO

- ITEM VII (1) The maximum injection rate should not exceed 400 BWPD.
- ITEM VII (2) The injection system will be operated as a closed system.
- ITEM VII (3) Based on the lower of two direct offsetting separate tests the maximum injection pressure should not exceed 777 psi.
- ITEM VII (4) The source of injection water for the subject well will be the Querecho Plains Bone Spring Sand Unit. The source of water for the Bone Spring Unit is fresh water supplied by the city of Carlsbad, Delaware produced water, Bone Spring produced water and Queen produced water. A copy of these water analyses is attached.
- ITEM VII (5) Not applicable.

# Affidavit of Publication

STATE OF NEW MEXICO )  
 ) ss.  
COUNTY OF LEA )

Joyce Clemens being first duly sworn on oath deposes and says that he is Adv. Director of THE LOVINGTON DAILY LEADER, a daily newspaper of general paid circulation published in the English language at Lovington, Lea County, New Mexico; that said newspaper has been so published in such county continuously and uninterruptedly for a period in excess of Twenty-six (26) consecutive weeks next prior to the first publication of the notice hereto attached as hereinafter shown; and that said newspaper is in all things duly qualified to publish legal notices within the meaning of Chapter 167 of the 1937 Session Laws of the State of New Mexico.

That the notice which is hereto attached, entitled  
Notice Of Secondary Water Injection  
Well  
and numbered ..... in the  
..... County of Dea  
County, New Mexico was published in a regular and  
entire issue of THE LOVINGTON DAILY LEADER and  
not in any supplement thereof, once each week on the  
same day of the week, for one (1) day  
consecutive weeks, beginning with the issue of .....  
October 1, 19 96  
and ending with the issue of .....  
October 1, 19 96

And that the cost of publishing said notice is the sum of \$ 14.43.....

~~which sum~~ has been (Paid) ,(Assessed) as Court Costs

which sum has been (Paid) (~~Assessed~~) as Court Costs

Jayce Clement

Subscribed and sworn to before me this 10th  
day of October, 1996.

Notary Public, Lea County, New Mexico

My Commission Expires Sept. 28, 19 98

**LEGAL NOTICE  
NOTICE OF  
SECONDARY WATER  
INJECTION WELL**

Mewbourne Oil Company, P.O. Box 7698, Tyler, Texas 75711, Phone (903) 561-2900, contact person K.M. Calvert, has made application for a secondary recovery water injection well within the NMOCED. The currently oil producing Querecho Plains QASU No. 6 is located 1650' FSL & 330' FEL of Section 22, Township 18S, Range 32E, Lea County, New Mexico. Injection will be into the Queen zone through perforations 3881 feet to 4151 feet. Maximum rate and pressures are anticipated to be 400 BWPD and 770 PSI. Interested parties must file objection or a request for a hearing with the New Mexico Oil Conservation Division, P.O. Box 2088, Santa Fe, New Mexico 87504 within fifteen (15) days of this notice.

Published in the Lovington Daily Leader October 1, 1996.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

**State of New Mexico  
Oil Conservation Division  
P. O. Box 2088  
Santa Fe, NM 87504-2088**

**Application for Auth. to Inj.  
QPQASU No. 6 and No. 13**

4a. Article Number

**Z 077 781 711**

4b. Service Type

- |   |   |
|---|---|
| <input type="checkbox"/> Registered           | <input type="checkbox"/> Insured                        |
| <input checked="" type="checkbox"/> Certified | <input type="checkbox"/> COD                            |
| <input type="checkbox"/> Express Mail         | <input type="checkbox"/> Return Receipt for Merchandise |

7. Date of Delivery

5. Signature (Addressee)

6. Signature (Agent)

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

Thank you for using Return Receipt Service.

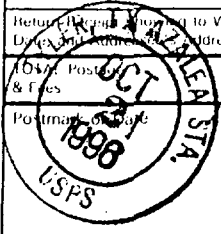


QPQASU No. 6 & 13  
Z 077 781 710



**Receipt for  
Certified Mail**

No Insurance Coverage Provided  
Do not use for International Mail  
(See Reverse)

|   |         |
|---|---------|
| Sent to<br><b>Anadarko Petroleum Corp.</b>  |         |
| Street and No.<br><b>Box 2497</b>   |         |
| P.O., State and ZIP Code<br><b>Midland, Texas 79702</b>   |         |
| Postage   | \$ 78   |
| Certified Fee   | 110     |
| Special Delivery Fee  |         |
| Restricted Delivery Fee   |         |
| Return Receipt Showing<br>to Whom & Date Delivered  | 110     |
| Return Receipt Showing to Whom,<br>Date, and Return Address   |         |
| TOTAL Postage<br>& Fees   | \$ 2.98 |
| Postmark or Date<br> |         |

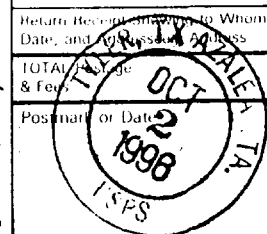
PS Form 3800, March 1993

QPQASU No. 6 & 13  
Z 077 781 709



**Receipt for  
Certified Mail**

No Insurance Coverage Provided  
Do not use for International Mail  
(See Reverse)

|  |         |
|--|---------|
| Sent to<br><b>USA - Carlsbad Resource Ar.</b>  |         |
| Street and No.<br><b>P. O. Box 1778</b>  |         |
| P.O., State and ZIP Code<br><b>Carlsbad, NM 88220</b>  |         |
| Postage  | \$ 78   |
| Certified Fee  | 110     |
| Special Delivery Fee   |         |
| Restricted Delivery Fee  |         |
| Return Receipt Showing<br>to Whom & Date Delivered   | 110     |
| Return Receipt Showing to Whom,<br>Date, and Return Address  |         |
| TOTAL Postage<br>& Fees  | \$ 2.98 |
| Postmark or Date<br> |         |

PS Form 3800, March 1993

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
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1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

USA - Carlsbad Resource Area  
P. O. Bxo 1778  
Carlsbad, NM 88220

QPQASU Nos. 6 & 13

620  
E 6-000

4a. Article Number

Z 077 781 709

4b. Service Type

- |   |   |
|---|---|
| <input type="checkbox"/> Registered           | <input type="checkbox"/> Insured                        |
| <input checked="" type="checkbox"/> Certified | <input type="checkbox"/> COD                            |
| <input type="checkbox"/> Express Mail         | <input type="checkbox"/> Return Receipt for Merchandise |

7. Date of Delivery

10/04/96

5. Signature (Addressee)

6. Signature (Agent)

*Betty A. Hill*

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

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
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I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:  
**Anadarko Petroleum Corp.**  
**Box 2497**  
**Midland, TX 79702**

4a. Article Number  
**Z 077 781-710**

4b. Service Type  
☐ Registered ☐ Insured  
☒ Certified ☐ COD  
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery  
**OCT 04 1996**

**QPOASU Nos. 6 & 13**

5. Signature (Addressee)

*Robert*

6. Signature (Agent)

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

PS Form 3811, December 1991

★U.S. GPO: 1993-352-714

**DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.