

hinklelawfirm.com

HINKLE, HENSLEY, SHANOR & MARTIN, L.L.P.

ATTORNEYS AT LAW

218 MONTEZUMA

SANTA FE, NEW MEXICO 87501

505-982-4554 (FAX) 505-982-8623

WRITER:

Thomas M. Hnasko
Partner
thnasko@hinklelawfirm.com

June 24, 2008

Bureau of Land Management
620 E. Green
Carlsbad, NM 88220-6292

Re: Mesquite SWD, Inc. Application to Modify Permit No. SWD 180 for the Exxon State No. 8 Produced Water Disposal Well

Dear Sir or Madame:

Enclosed please find Mesquite SWD, Inc.'s application to modify Permit SWD-180 for the Exxon State No. 8, a salt water disposal injection well. The Exxon State No. 8 has operated at a total depth of 694 feet since 1978 and is currently permitted for disposal of produced water to a depth of 600 feet in the Yates formation. The application seeks to formally increase the permitted depth of the well to 694 feet, which is still within the Yates formation.

Interested parties must file objections or requests for hearing with the Oil Conservation Division, 1220 South St. Francis Drive, Santa Fe, NM, 87505 within 15 days of receipt of this letter.

If you have any questions, or if I can be of assistance, please do not hesitate to contact me at (505) 982-4554.

Very truly yours,

Thomas M. Hnasko

PO BOX 10
ROSWELL, NEW MEXICO 88202
(505) 622-6510
FAX (505) 623-9332

PO BOX 3580
MIDLAND, TEXAS 79702
(432) 683-4691
FAX (432) 683-6518

PO BOX 2068
SANTA FE, NEW MEXICO 87504
(505) 982-4554
FAX (505) 982-8623

919 CONGRESS, SUITE 1150
AUSTIN, TEXAS 78701
(512) 476-7137
FAX (512) 476-7146

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:

Bureau of land management
620 E. Green
Carlsbad, NM 88220
6292

2. Article Number

(Transfer from service label)

7005 1820 0006 3433 8392

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Margo Borell* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Margo Borell

C. Date of Delivery

*6-27*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

U.S. Postal Service

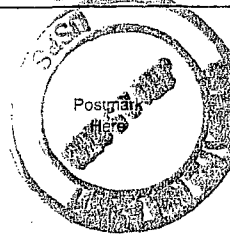
CERTIFIED MAIL RECEIPT

(Domestic Mail Only - No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$ 4.80
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 9.70



2689 EE4E 9000 0281 5002

Sent To

Bureau of land management

Street, Apt. No.,

or PO Box No.

City, State, ZIP+4

*620 E. Green
Carlsbad, NM 88220-6292*

PS Form 3800, June 2002

See Reverse for Instructions