THE STATA

STATE OF NEW MEXICO

ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION HOBBS DISTRICT OFFICE

BRUCE KING GOVERNOR September 2, 1992

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

Cross Timbers Operating Company P.O. Box 50847 Midland, TX 79710

Attn: Gary L. Marketstad

RE: TA of "federal" well

SMGSAU

Gentlemen:

We are returning the C-103 submitted on the SMGSAU Tr 3 #1-H 30-17-33, showing the well as SI Nov. 6, 1989. Since this is a "federal" well you will need to apply for approval of TA status through the BLM office. They will approve it and forward it on to us. We accept their TA approvals on injection wells.

I believe they require the same type testing for mechanical integrity as we do. It is our understanding they only issue permits for one year periods, but will approve extensions of that TA status based upon that test for up to five years. However, you will be required to submit a request for extension each year.

Very truly yorus,

OIL CONSERVATION DIVISION

Jerry Sexton Supervisor, District I

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Encl.



Subtrat 3 Corpea to Appropriate District Office	State of New M Energy, Minerals and Natural R	-	Form C-103 I Revised 1-1-49
DISTRICT I P.O. Box 1980, Hobbs, NM 8E240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT III 1000 Rio Brazos Rd., Azioc, NM 87410	OIL CONSERVATION P.O. Box 20 Santa Fe, New Mexico	88	WELL API NO. 30-025-0155800S1 5. Indicate Type of Lease FEDERAL STATE FEE 6. State Oil & Gas Lease No. LC-060967
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agroconcut Name
1. Type of Well: Oil. Veril Oil. Veril Oil. 2. Name of Operator	omes WIW		SMGSAU Tract 3
CROSS TIMBERS OPERATING COMPANY Address of Operator			8. Well No.
P. 0. Box 50847	Midland, Texas 797	10	Maljamar Grayburg SA
Unit Letter H : 198	O Foot From The North	time and660	Feet From The East Line
Section 30	Township 175 Ru		NMPM Lea County
	4071' DF	DF. RAB. RI. GR. de.J	
	: Appropriate Box to Indicate ITENTION TO:		eport, or Other Data SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANCON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	CPNS. PLUG AND ABANCONMENT
PULL CRALTER CASING		CASING TEST AND CE	8 8 0 T N 3 M 3
OTHER:	0	OTHER: SHUT-I	N 11-6-89 XX
12. Describe Proposed or Completed Open	mione (Clearly state all periment details, a	ed give parinent datat, inche	ding enimeted date of maring any proposed
SIGNATURE Gary L.	Markestad	ਿਯਾਟ ਹperations E	ngineer 8/31/92 теленомено. (915) 682-887
(This spect for State Use)			
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COMPITEDRS OF APPROVAL, P ANTS