



STATE OF NEW MEXICO  
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION  
HOBBS DISTRICT OFFICE

BRUCE KING  
GOVERNOR

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

October 28, 1993

Exxon Co.  
ATT: Judy M. Bagwell  
P O Box 1600  
Midland, TX 79702

RE: RECLASSIFICATION OF WELLS  
BLINEBRY OIL & GAS POOL  
F.F.Hardison B #2-A, Sec.34, T21S, R37E  
F.F.Hardison B #3-G, Sec.34, T21S, R37E

Gentlemen:

According to the recently submitted 'scheduled' gas/oil ratio test the above-referenced wells will be reclassified from oil wells to gas wells in the Blinebry Oil & Gas Pool effective January 1, 1994, and the oil allowable cancelled effective that date.

If for some reason you feel this test does not reflect the proper classification of this well, please submit another test for our consideration by November 11, 1993.

If the well is to be reclassified to a gas well, please submit the following:

- 1) Revised C-102 outlining acreage to be dedicated to gas proration unit. If proration unit size or well location requires additional approval, please furnish order number approving same or copy of your application for approval of NSP and/or NSL.
- 2) C-104 showing reclassification from oil to gas and designating transporters of condensate and dry gas.

If you have questions concerning the above, please contact Donna Pitzer at (505) 393-6161.

Very truly yours,

OIL CONSERVATION DIVISION

Jerry Sexton  
Supervisor, District I

JS;:dp

*Re-submitted 11/2/93  
Pending*



Submit 2 copies to Appropriate District Office:  
 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

Form C-116  
 Revised 1/1/89

**OIL CONSERVATION DIVISION**  
 P.O. Box 2088  
 Santa Fe, New Mexico 87504-2088

*Handwritten initials/signature*

**GAS - OIL RATIO TEST**

Operator: **EXXON CO., U.S.A.** Pool: *Blanco*  
 CONTROL S. ACCOUNTING, CDB - ML12  
 Address: **P.O. BOX 1600, MIDLAND, TX 79702** County: *Deer*

LEASE NAME	WELL NO.	LOCATION				DATE OF TEST	TYPE OF TEST - (M)	SCHEDULED	DAILY ALLOW-ABLE	LENGTH OF TEST HOURS	PROD. DURING TEST		GAS RATIO CU/FT/BL.
		U	S	T	R						WATER BBL.S.	GRAV. OIL BBL.S.	
<i>F. Stanford</i>	<i>1</i>	<i>45</i>	<i>34</i>	<i>21</i>	<i>37</i>	<i>9-22-93</i>	<input checked="" type="checkbox"/>		<i>24</i>	<i>0</i>	<i>6.2</i>	<i>491</i>	<i>79194</i>
<i>Rudlaanly</i>	<i>2</i>	<i>4</i>	<i>34</i>	<i>21</i>	<i>37</i>	<i>9-23-93</i>	<input checked="" type="checkbox"/>		<i>24</i>	<i>0</i>	<i>4.4</i>	<i>338</i>	<i>76818</i>
<i>Rudlaanly</i>	<i>3</i>	<i>3</i>	<i>34</i>	<i>21</i>	<i>37</i>	<i>9-24-93</i>	<input checked="" type="checkbox"/>		<i>24</i>	<i>0</i>	<i>6.4</i>	<i>326</i>	<i>50938</i>
<i>Rudlaanly</i>	<i>4</i>	<i>2</i>	<i>34</i>	<i>21</i>	<i>37</i>	<i>7-28-93</i>	<input checked="" type="checkbox"/>		<i>24</i>	<i>0</i>	<i>0.0</i>	<i>682</i>	<i>NEG</i>
<i>New Mexico STATE</i>	<i>2</i>	<i>4</i>	<i>22</i>	<i>22</i>	<i>37</i>	<i>9-28-93</i>	<input checked="" type="checkbox"/>		<i>24</i>	<i>2</i>	<i>2.0</i>	<i>294</i>	<i>147000</i>
<i>Rudlaanly</i>	<i>1</i>	<i>2</i>	<i>22</i>	<i>22</i>	<i>37</i>	<i>9-4-93</i>	<input checked="" type="checkbox"/>		<i>24</i>	<i>0</i>	<i>9.0</i>	<i>186</i>	<i>80667</i>
	<i>21</i>	<i>2</i>	<i>22</i>	<i>22</i>	<i>37</i>	<i>SI</i>	<input checked="" type="checkbox"/>		<i>24</i>	<i>0</i>	<i>10.7</i>	<i>427</i>	<i>39907</i>
	<i>22</i>	<i>3</i>	<i>22</i>	<i>22</i>	<i>37</i>	<i>9-25-93</i>	<input checked="" type="checkbox"/>		<i>24</i>	<i>0</i>	<i>16.0</i>	<i>482</i>	<i>39876</i>
	<i>27</i>	<i>4</i>	<i>22</i>	<i>22</i>	<i>37</i>	<i>8-26-93</i>	<input checked="" type="checkbox"/>		<i>24</i>	<i>0</i>	<i>20.3</i>	<i>79</i>	<i>3875</i>
	<i>28</i>	<i>5</i>	<i>22</i>	<i>22</i>	<i>37</i>	<i>9-1-93</i>	<input checked="" type="checkbox"/>		<i>24</i>	<i>0</i>			

**Instructions:**

During gas-oil ratio test, each well shall be produced at a rate not exceeding the top unit allowable for the pool in which well is located by more than 25 percent. Operator is encouraged to take advantage of this 25 percent tolerance in order that well can be assigned increased allowables when authorized by the Division.

Gas volumes must be reported in MCF measured at a pressure base of 15.025 psia and a temperature of 60° F. Specific gravity base will be 0.60.  
 Report casing pressure in lieu of tubing pressure for any well producing through casing.

(See Rule 301, Rule 1116 & appropriate pool rules.)

I hereby certify that the above information is true and complete to the best of my knowledge and belief.

Signature: *Judy M. Bagwell*

Printed name and title: **Judy M. Bagwell, Sr. Staff Office Asst.**

Date: *10-8-93* (915) 688-6663  
 Telephone No.

10-19

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-116  
Revised 1/1/89

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Santa Fe, New Mexico 87504-2088

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100 Rio Brazos Rd., Aztec, NM 87410

107-4000

**GAS - OIL RATIO TEST**

LEASE NAME	WELL NO.	LOCATION			DATE OF TEST	CHOKE SIZE	TBG. PRESS.	DAILY ALLOWABLE	LENGTH OF TEST HOURS	PROD. DURING TEST			GAS - OIL RATIO CU.FT/BBL
		U	S	T						R	WATER BBL.S.	GRAV. OIL	
F. Hardison 'B' *M2 Remains Dil	2	A	34	21	37	11-4-93	P		24	3	7.0	241	34443
FILED TO RETAIN DIL CLASSIFICATION.													

Operator EXXON CO., U.S.A.  
CONTROLS ACCOUNTING, CDB - ML12  
P.O. BOX 1600, MIDLAND, TX 79702  
County Lea

TYPE OF TEST - (X)  Scheduled  Completion  Special

I hereby certify that the above information is true and complete to the best of my knowledge and belief.

Signature Judy M. Bagwell  
Printed name and title Judy M. Bagwell, Sr. Staff Office Asst.  
Date 11-10-93  
Telephone No. (915) 688-6663

INSTRUCTIONS:  
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