



STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION
HOBBS DISTRICT OFFICE

8/2/00

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

GOVERNOR

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RE: Proposed:

MC	_____
DHC	_____
NSL	_____
NSP	_____
SWD	_____
WFX	_____
PMX	_____

Gentlemen:

I have examined the application for the:

Permian Resources Inc Harrison #2-I-22-255-37e
 Operator Lease & Well No. Unit S-T-R API# 30-025-1169C

and my recommendations are as follows:

OK

Yours very truly,

Chris Williams
Supervisor, District 1

/ed

July 21, 2000

State of New Mexico
Oil Conservation Commission
P. O. Box 2088
Santa Fe, NM 87501

RE: Application for Authorization to Inject
Langlie-Mattix (Queen) Field
Permian Resources, Inc. #2 Harrison
T25S, R37E, Section 22

Ladies and Gentlemen:


Permian Resources, Inc. is making application to inject water into a zone productive of oil and gas at the location captioned above in Lea County.

Please find attached the appropriate documents which support this application

- II. Well Data
- V. Well Area of Review Map
- VI. Schematics of wells within the Area of Review
- VII. Data on the Proposed Operation
- VIII. Geological Data
- IX. Proposed stimulation Program
- X. Log Sections
- XI. Fresh Water Wells
- XII. Examination of Hydrologic Data
- XIV. Proof of Notice

We appreciate your timely approval of this matter and if you have any questions please feel free to call.

Sincerely,


Dave Kvasnicka

RECEIVED
Hobbs
NCD

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 87240
 District II
 811 South First, Artesia, NM 87210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised March 25, 1999

OIL CONSERVATION DIVISION
 2040 South Pacheco
 Santa Fe, NM 87505

WELL API NO.
 30-025-11690

5. Indicate Type of Lease
 STATE FEE

6. State Oil & Gas Lease No.
 NM 12383 (LC-032579-A)

7. Lease Name or Unit Agreement Name:
 Harrison

8. Well No.
 2

9. Pool name or Wildcat
 Langlie-Mattix Queen

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
 3066 DF

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:
 Oil Well Gas Well Other

2. Name of Operator
 Permian Resources, Inc. dba Permian Partners, Inc.

3. Address of Operator
 P. O. Box 590, Midland, Texas 79702

4. Well Location
 Unit Letter I : 2310 feet from the South line and 990 feet from the East line
 Section 22 Township 25A Range 37E NMPM County Lea

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: convert to injection <input checked="" type="checkbox"/>		OTHER: <input type="checkbox"/>	

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

Well is currently shut-in with open hole below 7" steel casing set at 3218' down to total depth of 3366'. Operator is proposing to use 3220' of 2-3/8" IPC tubing with 7" Baker AD-1 packer set at 3200'. Injected fluid will be produced water. Maximum rate will be 500 barrels daily at 1450 psig.

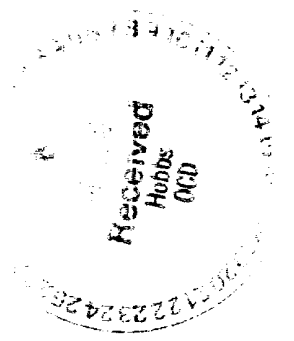
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Dave Kvasnicka TITLE Geologist DATE 06/15/00

Type or print name Dave Kvasnicka Telephone No. 915/685-0113
 (This space for State use)

APPROVED BY _____ TITLE _____ DATE _____

Conditions of approval, if any:



APPLICATION FOR AUTHORIZATION TO INJECT

- I. Purpose: Secondary Recovery Pressure Maintenance Disposal Storage
Application qualifies for administrative approval? yes no
- II. Operator: Permian Resources, Inc. dba Permian Partners, Inc.
Address: P. O. Box 590, Midland, TX 79702
Contact party: Robert H. Marshall Phone: 915/685-0113
- 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 _____
- 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: David E. Kvasnicka Title Geologist
Signature: *David E. Kvasnicka* Date: 7-21-00
- * 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. N/A

Received
Hobbs
OCD

10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

LANE LOG WELLS COMPANY

Location of Well COMPANY: WESTATES PET. CORP. WELL: CARLSON A-22 NO. 2 HOLE FIELD: LAMBIE-MATTIX COUNTY: LEA STATE: N.M. LOCATION: SW/4 OF SE/4 OF SEC 22-25S-37E 3074'DP	COMPANY: WESTATES PET. CORP. WELL: CARLSON A-22#2 HOLE FIELD: LAMBIE-MATTIX COUNTY: LEA STATE: N.M. LOCATION: SW/4 OF SE/4 OF SEC 22-25S-37E
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LOG MEASURED FROM GROUND LEVEL ELEVATION 3064'

DRILLING MEASURED FROM GL ELEVATION 3064'

PERMANENT DATUM 9 5/8" BRADEN H ELEVATION 3061'

RUN NUMBER	TYPE OF LOG	DATE
1	GAMMA RAY	MAY 13-48
2	NEUTRON	MAY 21-48

COMPANY DEPTH	RACK	MAXIMUM DEPTH REACHED
3334'		3338'

WELL FLUID	OIL-WATER	OIL-WATER
FULL	1900'	1900'

MAXIMUM TEMPERATURE	O.D. OF INSTRUMENT—INCHES	SENSITIVITY REFERENCE
3 5/8"	274	275

CASING RECORD	OPEN HOLE RECORD												
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>RUN NO.</th> <th>SIZE—IN.</th> <th>WT.—LB.</th> <th>INTERVAL</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>2</td> <td>7</td> <td>3212' TO T.D.</td> </tr> </tbody> </table>	RUN NO.	SIZE—IN.	WT.—LB.	INTERVAL	1	2	7	3212' TO T.D.	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>BIT SIZE—IN.</th> <th>INTERVAL</th> </tr> </thead> <tbody> <tr> <td>5 1/4"</td> <td>3212' TO T.D.</td> </tr> </tbody> </table>	BIT SIZE—IN.	INTERVAL	5 1/4"	3212' TO T.D.
RUN NO.	SIZE—IN.	WT.—LB.	INTERVAL										
1	2	7	3212' TO T.D.										
BIT SIZE—IN.	INTERVAL												
5 1/4"	3212' TO T.D.												

REMARKS OR OTHER DATA
 * DID NOT GO TO TOTAL DEPTH ON 2ND RUN.
 THIS IS A COMPOSITE OF RUNS #1 AND RUNS #2.

