

**STATE OF NEW MEXICO
DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES
OIL CONSERVATION DIVISION**

**APPLICATION OF MANZANO LLC
FOR APPROVAL OF A PRESSURE
MAINTENANCE PROJECT AND
AUTHORIZATION TO INJECT,
LEA COUNTY, NEW MEXICO.**

CASE NO. 22357

EXHIBIT INDEX

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STATE OF NEW MEXICO
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APPLICATION OF MANZANO LLC
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MAINTENANCE PROJECT AND
AUTHORIZATION TO INJECT,
LEA COUNTY, NEW MEXICO.

CASE NO. 22357

SELF-AFFIRMED STATEMENT
OF NICK C. MCCLELLAND

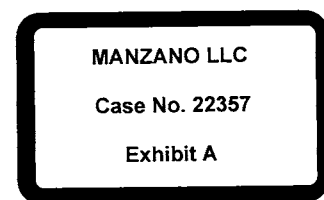
1. I am the Land Manager at Manzano LLC (“Manzano”). I am over 18 years of age, have personal knowledge of the matters addressed herein, and am competent to provide this Self-Affirmed Statement. I have previously testified before the New Mexico Oil Conservation Division (“Division”), and my qualifications as an expert in petroleum land matters were accepted and made a matter of record.

2. I am familiar with the Application in this case and with the land matters pertaining to this Application. Copies of the application and proposed notice are attached as Exhibit A-1.

3. Manzano’s Application seeks an order: (1) approving a pressure maintenance project for the injection of produced gas through the Vince BGH #1 well into the Jenkins San Andres pool (Pool Code 33950) within the San Andres formation in a project area (“Project Area”) comprised of SE/4 of Section 30, Township 9 South, Range 35 East, NMPM, Eddy County, New Mexico; and (2) authorizing Manzano to convert the Vince BGH #1 well from a producing well to an injector.

4. Manzano operates the following described wells within or near the Project Area currently producing from the Jenkins San Andres Pool:

- a. **Sodbuster 21 Fee #4H** (API 30-025-43704) horizontally drilled from a surface hole location at 200 FSL, 1650 FWL in Section 21 to a bottom hole location at 335 FNL, 1630 FWL in Section 21;



- b. **Rag Mama 30-19 Fee #1H** (API 30-025-44067) horizontally drilled from a surface hole location at 25 FSL, 528 FEL in Section 30 to a bottom hole location at 2303 FSL, 394 FEL in Section 19; and
 - c. **Vince BGH No. 1H** (API No. 30-025-37104) (“Vince”) vertically drilled at 1980 FSL, 1750 FEL (Unit J) of Section 30.
5. The wells were initially drilled as producers within the San Andres formation.
 6. The perforated interval of the Rag Mama 30-19 Fee #1 is 5,250’ to 12,123’; the perforated interval of the Sodbuster 21 Fee #4H is 5,150’ to 9,330’; and the perforated interval of the Vince BGH No. 1H is 4840’ to 4850’.
 7. The Vince well currently produces 2 BOPD and 31 BWPD and is deemed uneconomic. Therefore, Manzano proposes to convert the well from a producer into an injection well to provide pressure maintenance support for the Rag Mama 30 19 Fee #1 well. Converting the well from a producer to an injector will also attempt to eliminate flaring.
 8. Manzano plans to inject produced gas from the Sodbuster 21 Fee #4 and Rag Mama 30-19 Fee #1 into the San Andres formation through a closed system using the Vince BGH No. 1H at depths of 4840’ to 4850’ within the San Andres formation.
 9. Accordingly, Manzano proposes the unitized interval be defined as the Jenkins San Andres pool (Pool Code 33950) within the San Andres formation at depths of 4840’ to 4850’ as defined on the Manzano Vince BGH #1 well log provided on page 24 of Form C-108.
 10. **Exhibit A-2** includes a copy of Manzano’s Application for Authorization to Inject (“Form C-108”). I am generally familiar with the land matters addressed in the Form C-108.
 11. Page 32 of Form C-108 contains a land map of the Project Area that identifies surface and mineral ownership interests entitled to notice within the area of review and includes applicable lease numbers. There are no other operators within a ½ mile area of review radius.

12. Page 12 of Form C-108 is an area of review map of the Project Area that depicts the producing wells and other wells within the ½ mile radius areas of review that penetrate the proposed injection zone. Pages 13-18 of Form C-108 provide detailed well information for the wells within the areas of review.

13. Manzano conducted a diligent, good-faith effort to identify the correct addresses of persons entitled to notice and has complied with the Division's notice requirements.

14. Notice of the Division's hearing was provided to all affected parties at least 20 days prior to the hearing date. A sample of the hearing notice letter and the associated return receipts are attached as **Exhibit A-3**.

15. Notice of the hearing was also published more than ten business days prior to the hearing date. The affidavit of publication is attached as **Exhibit A-4**.

16. The exhibits referenced above were either prepared by me or under my supervision or were compiled from company business records.

17. In my opinion, the granting of Manzano's application would serve the interests of conservation, the prevention of waste, and the protection of correlative rights.

18. I understand this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 17 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.


Nick C. McClelland

11/19/21
Date

STATE OF NEW MEXICO
DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES
OIL CONSERVATION DIVISION

APPLICATION OF MANZANO LLC
FOR APPROVAL OF A PRESSURE
MAINTENANCE PROJECT AND
AUTHORIZATION TO INJECT,
LEA COUNTY, NEW MEXICO.

Case No. 22357

APPLICATION

In accordance with NMAC 19.15.27.8, Manzano LLC (“Applicant”) (OGRID No. 231429) files this application with the Oil Conservation Division for an order: (1) approving a pressure maintenance project for the injection of produced gas through the Vince BGH #1 well into the San Andres formation in a project area (“Project Area”) comprised of SE/4 of Section 30, Township 9 South, Range 35 East, NMPM, Eddy County, New Mexico; and (2) authorizing Manzano to convert the Vince BGH #1 well from a producing well to an injector. In support of its application, Applicant states:

1. Applicant operates the following described wells within or near the Project Area:
 - the Sodbuster 21 Fee #4H (API 30-025-43704) with a surface hole location at 200 FSL, 1650 FWL of Section 21 and a bottom hole location at 330 FNL, 1650 FWL of Section 21;
 - the Rag Mama 30-19 Fee #1 (API 30-025-44067) with a surface hole location at 25 FSL, 528 FEL of Section 30 and a bottom hole location at 2303 FSL, 394 FEL of Section 19; and
 - The Vince BGH No. 1H (API No. 30-025-37104) located at 1980 FSL, 1750 FEL (Unit J) of Section 30.
2. The wells are currently producing from the Jenkins San Andres Pool (Pool No. 33950).
3. Applicant proposes to convert its Vince BGH No. 1H well from a producer into an injection well for pressure maintenance operations. Applicant plans to inject produced gas from the

MANZANO LLC
Case No. 22357
Exhibit A-1

Sodbuster 21 Fee #4 and Rag Mama 30-19 Fee #1 into the San Andres formation through a closed system using the Vince BGH No. 1H. Applicant does not anticipate compatibility issues.

4. The injection interval of the Vince BGH No. 1H is 4840 feet to 4850 feet.

5. Injection will provide pressure maintenance support for the Rag Mama 30 19 Fee #1 well and will also reduce flaring.

6. The expected average injection rate of produced gas into the Vince BGH No. 1H is 150 MCFGPD. The expected maximum injection rate is 1,000 MCFGPD to provide Manzano the option to inject more gas as the GOR increases or if Manzano drills additional wells in the Jenkins San Andres Pool.

7. The expected average injection pressure of produced gas into the Vince BGH No. 1H is 500 psi and the proposed maximum injection pressure is 950 psi.

8. Applicant's proposed pressure maintenance project can be conducted in a safe and responsible manner without causing waste, impairing correlative rights or endangering fresh water, public health or the environment.

9. Approval of this application will be in the best interest of conservation, the prevention of waste and the protection of correlative rights.

10. A copy of the applicable C-108 is attached as Exhibit A.

WHEREFORE, Applicant requests this application be set for hearing on December 2, 2021, and after notice and hearing, the Division enter an order: (1) approving a pressure maintenance project for the injection of produced gas through the Vince BGH #1 well into the San Andres formation in the Project Area; and (2) authorizing Manzano to convert the Vince BGH #1 well from a producer to an injector.

Respectfully submitted,

HINKLE SHANOR LLP

/s/ Dana S. Hardy

Dana S. Hardy

Michael Rodriguez

P.O. Box 2068

Santa Fe, NM 87504-2068

Phone: (505) 982-4554

Facsimile: (505) 982-8623

dhardy@hinklelawfirm.com

mrodriguez@hinklelawfirm.com

Counsel for Manzano LLC

Application of Manzano LLC for Approval of a Pressure Maintenance Project and Authorization to Inject, Lea County, New Mexico. Applicant seeks an order: (1) approving a pressure maintenance project for the injection of produced gas through the Vince BGH #1 well into the San Andres formation in a project area ("Project Area") comprised of SE/4 of Section 30, Township 9 South, Range 35 East, NMPM, Eddy County, New Mexico; and (2) authorizing Manzano to convert the Vince BGH #1 well from a producer to an injector. Applicant operates the following described wells within or near the Project Area:

- the Sodbuster 21 Fee #4H (API 30-025-43704) with a surface hole location at 200 FSL, 1650 FWL of Section 21 and a bottom hole location at 330 FNL, 1650 FWL of Section 21;
- the Rag Mama 30-19 Fee #1 (API 30-025-44067) with a surface hole location at 25 FSL, 528 FEL of Section 30 and a bottom hole location at 2303 FSL, 394 FEL of Section 19; and
- The Vince BGH No. 1H (API No. 30-025-37104) located at 1980 FSL, 150 FEL (Unit J) of Section 30.

The wells are currently producing from the Jenkins San Andres Pool (Pool No. 33950). Applicant proposes to convert its Vince BGH No. 1H well from a producer into an injection well for pressure maintenance operations. Applicant plans to inject produced gas from the Sodbuster 21 Fee #4 and Rag Mama 30-19 Fee #1 into the San Andres formation through a closed system using the Vince BGH No. 1H. Applicant does not anticipate compatibility issues. The injection interval of the Vince BGH No. 1H is 4840 feet to 4850 feet. Injection will provide pressure maintenance support for the Rag Mama 30 19 Fee #1 well and will also reduce flaring. The expected average injection rate of produced gas into the Vince BGH No. 1H is 150 MCFGPD. The expected maximum injection rate is 1,000 MCFGPD to provide Manzano the option to inject more gas as the GOR increases or if Manzano drills additional wells in the Jenkins San Andres Pool. The expected average injection pressure of produced gas into the Vince BGH No. 1H is 500 psi and the proposed maximum injection pressure is 950 psi. Applicant's proposed pressure maintenance project can be conducted in a safe and responsible manner without causing waste, impairing correlative rights or endangering fresh water, public health or the environment. The wells are located approximately 18.1 miles north of Tatum, New Mexico.

Revised March 23, 2017

RECEIVED:	REVIEWER:	TYPE:	APP NO:
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ABOVE THIS TABLE FOR OCD DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION
 - Geological & Engineering Bureau -
 1220 South St. Francis Drive, Santa Fe, NM 87505



ADMINISTRATIVE APPLICATION CHECKLIST

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

Applicant: Manzano, LLC **OGRID Number:** 231429
Well Name: VINCE BGH #1 **API:** 30-025-37104
Pool: JENKINS SAN ANDRES **Pool Code:** 319660

SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED BELOW

- 1) **TYPE OF APPLICATION:** Check those which apply for [A]
 A. Location – Spacing Unit – Simultaneous Dedication
 NSL NSP (PROJECT AREA) NSP (PRORATION UNIT) SD
- B. Check one only for [I] or [II]
 [I] Commingling – Storage – Measurement
 DHC CTB PLC PC OLS OLM
 [II] Injection – Disposal – Pressure Increase – Enhanced Oil Recovery
 WFX PMX SWD IPI EOR PPR

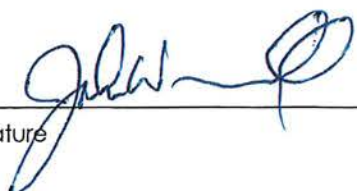
FOR OCD ONLY	
<input type="checkbox"/>	Notice Complete
<input type="checkbox"/>	Application Content Complete

- 2) **NOTIFICATION REQUIRED TO:** Check those which apply.
 A. Offset operators or lease holders
 B. Royalty, overriding royalty owners, revenue owners
 C. Application requires published notice
 D. Notification and/or concurrent approval by SLO
 E. Notification and/or concurrent approval by BLM
 F. Surface owner
 G. For all of the above, proof of notification or publication is attached, and/or,
 H. No notice required

3) **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate** and **complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

JOHN WORRALL
Print or Type Name


Signature

9/28/2021
Date

575-623-1996 EXT. 302
Phone Number



JWORRALL@MANZANOENERGY.CO
e-mail Address



September 28, 2021

New Mexico Oil Conservation Division
1220 South St. Francis Drive
Santa Fe, NM 87505

New Mexico Oil Conservation Division
1625 N. French Drive
Hobbs, NM 88240

RE: Gas Injection Application
Manzano, LLC Vince BGH #1

Manzano, LLC hereby submits an application to convert the Vince BGH #1 to a gas injection well. Accordingly, please find enclosed an original and one copy of our application Form C-108 with attachments. A third copy has been sent to the Division Office in Hobbs. A Legal Notice of our application has been filed with the Hobbs Sun newspaper.

Should you have any questions regarding our application, I can be reached at 575-623-1996 ext. 302 or 575-420-5853 cell. Thank you for your assistance in handling our application.

Sincerely,



John Worrall
On behalf of Manzano, LLC

STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL
RESOURCES DEPARTMENT

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, New Mexico 87505

FORM C-108
Revised June 10, 2003

APPLICATION FOR AUTHORIZATION TO INJECT

I. PURPOSE: Secondary Recovery Pressure Maintenance Disposal Storage
Application qualifies for administrative approval? Yes No

II. OPERATOR: MANZANO, LLC

ADDRESS: P.O. BOX 1737, ROSWELL, NM 88202-1737

CONTACT PARTY: JOHN WORRALL PHONE: 575-623-1996

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 geologic data on the injection zone including appropriate lithologic detail, geologic 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 sources 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 sources 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: JOHN WORRALL TITLE: MANAGER

SIGNATURE:  DATE: 9/27/21

E-MAIL ADDRESS: JWORRALL@MANZANOENERGY.COM

* If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted. Please show the date and circumstances of the earlier submittal: _____

DISTRIBUTION: Original and one copy to Santa Fe with one copy to the appropriate District Office

Side 2

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 the 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, 1220 South St. Francis Dr., Santa Fe, New Mexico 87505, 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.

Answers to FORM C-108. Application of Manzano, LLC to inject gas into the VINCE BGH #1.

III. The well data for the proposed injection well is attached along with the current and proposed wellbore diagram.

V. Attached is the Area of Review map identifying six total wells within the ½ mile radius of the Injection well including the injection well, one producing oil well, and four plugged and abandoned wells.

VI. The table of well data shows casing and cement information, the perforated intervals, and the plugging and abandonment information. Wellbore diagrams are attached for the five wells within the Area of Review.

VIII. 1. Manzano, LLC proposes to inject an average of 150 MCFGPD into the well. The maximum daily rate requested is 1000 MCFGPD to give Manzano the option to inject more gas as the GOR increases or if Manzano drills additional wells in the Jenkins San Andres pool.

2. The system is closed. There are two source wells and one injection well, all in the same reservoir, the San Andres P-1 dolomite.

3. The proposed average injection pressure is 500 psi, the proposed maximum injection pressure is 950 psi.

4. Source Wells: The gas to be injected is produced in the only two active wells in the Jenkins San Andres pool. It will be injected into the same zone in the injection well. There should no compatibility issues. These two source wells currently produce 59 BOPD, 129 MCFGPD, and 1068 BWPD.

a. Manzano, LLC Rag Mama 30 19 Fee #1 (API 30-025-37104) located at 25 FSL, 528 FEL Sec. 30-T9S-R35E.

b. Manzano, LLC Sodbuster 21 Fee #4H (API 30-025-43704) located at 200 FSL, 1650 FWL Sec. 21-T9S-R35E.

5. Gas analyses from the two source wells are attached.

VIII. Geologic Information of the Injection zone: See the attached log section cross section. The gas will be injected into the San Andres P-1 dolomite in existing perforations at 4840 to 4850 feet in the Vince BGH #1. This well will be converted from an existing oil producer to a gas injector for the purpose of maintaining reservoir pressure, to allow for more oil to be produced from the reservoir. The well currently produces 2 BOPD and 31 BWPD and is uneconomic. Reservoir: The San Andres formation is present from 4000 to 5460 feet in this well. The interval from 4810 to 4900 is known as the P-1 dolomite, which is a fine crystalline dolomite with 4% to 12% porosity, and 20 to 100 ohm-m of resistivity. The interval has up to 100 feet of porosity greater than 6% (See attached isopach map). Oil and gas is stratigraphically trapped where this

reservoir pinches out northward into anhydrite. The zone is also overlain by anhydrite, and underlain by a tight limestone.

Water Aquifer: The water aquifer in the area are the Ogalalla red beds. Attached is a map ("Figure 4") from Atkins Engineering of Roswell showing the top of the aquifer is present at 4025 feet above sea level. The Vince BGH #1 well has a drill floor elevation of 4183 feet, which means water is found in the red beds at 158 feet. Atkins Engineering indicates there is approximately 25 feet of water in this area

IX. No additional stimulation is planned. The zone has already been acidized with 41,000 gallons of 15% NEFE acid.

X. Logs of this well are attached.

XI. There are no water wells within one mile of the proposed injection well. Attached is a map from Atkins Engineering ("Figure 3") which identifies the nearest water wells, all of which are located 2.5 to 3 miles from the injection well.

XIII. An Affidavit is attached.

XIV. Attached is a Land Map showing that there are no other operators within the ½ mile Area of Review radius. A copy of the application has been sent by certified mail to the surface owner, C J. Kinsolving. A receipt is attached.

Attached is the Legal Notice filed with the Hobbs News Sun.

Other Attachments to this application:

Injection Well Data Sheet

Injection Well Current Wellbore Diagram

Injection Well Proposed Wellbore Diagram

Area of Review Map

Table of Well Data

Wellbore Diagrams of other five wells within the Area of review

Gas Analysis – Manzano, LLC Rag Mama 30 19 Fee #1H

Gas Analysis – Manzano, LLC Sodbuster 21 Fee #4H

Log Cross Section of the P-1 Dolomite

Net Porosity Isopach Map of the P-1 Dolomite

Map of Top of Water in the Ogalalla Red Beds from Atkins Engineering

Location Map of Fresh Water Wells from Atkins Engineering

Land Map

Affidavit

Legal Notice in the Hobbs News Sun

Proof of Notice to the Surface Owner Charles Kinsolving

Proof of Notice to the Bureau of Land Management Carlsbad Office

Statement on Seismicity Analysis



- VIII. 1. Manzano proposes to inject an average of 150 Mcfgpd into the Vince BGH #1. The maximum proposed rate is 1000 MCFGPD.
- 2. The system is closed.
- 3. The average proposed injection pressure is 500 psi. The maximum proposed pressure is 950 psi. A 10 day shut in test on the Vince, revealed the current bottomhole pressure is 378 psi. The original bottomhole pressure is calculated as 1697 psi.
- 4. Gas will be sourced by the Sodbuster 21 #4H and the Rag Mama 30 19 Fee #1H wells. These wells currently produce 59 BOPD, 129 MCFGPD and 1068 BWPD.

Side 2

INJECTION WELL DATA SHEET

Tubing Size: 2 7/8" Lining Material: _____
 Type of Packer: ARROWSET 1-X
 Packer Setting Depth: 4750
 Other Type of Tubing/Casing Seal (if applicable): _____

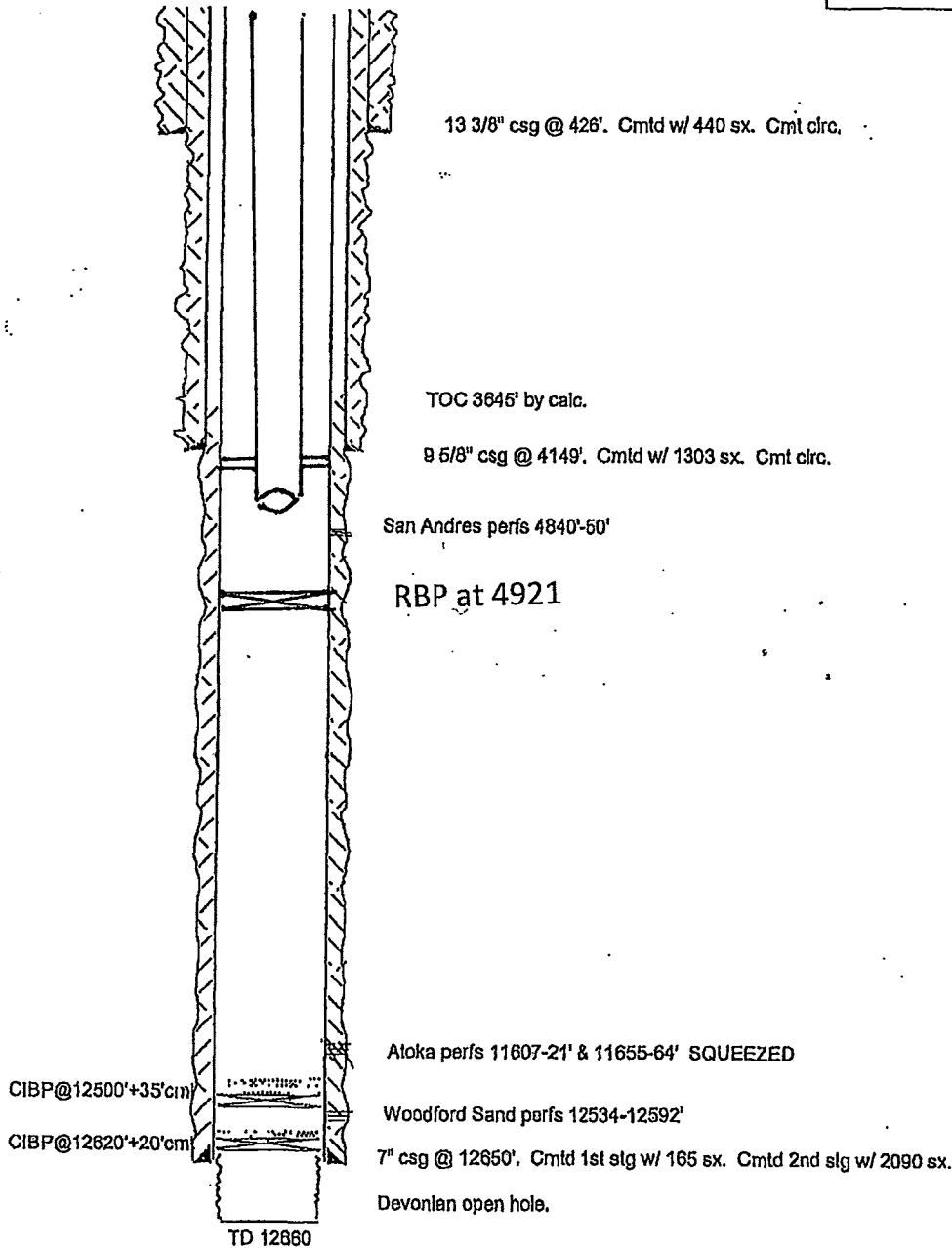
Additional Data

1. Is this a new well drilled for injection? _____ Yes X No
 If no, for what purpose was the well originally drilled? _____
DEVONIAN OIL WELL
2. Name of the Injection Formation: SAN ANDRES
3. Name of Field or Pool (if applicable): JENKINS SAN ANDRES
4. Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail, i.e. sacks of cement or plug(s) used. 1. DEVONIAN UPHOLE SET CIBP AT 12620. 20 CMT ON TOP 2. WOODFORD 12534-12592 SET CIBP AT 12500 30' CMT. 3. ATOKA PERFS 11607-11621, 11655-11664. SQUEEZED. 4. SAN ANDRES 4840-50.
5. Give the name and depths of any oil or gas zones underlying or overlying the proposed injection zone in this area: SAN ANDRES IS PRODUCTIVE. TOP IS 4000. BOUGH C FORMERLY PRODUCED, NOW INACTIVE IN AREA, TOP IS 9738, DEVONIAN(TOP OF 12650) PRODUCES IN SECTION 20.

CURRENT WELLBORE DIAGRAM PROPOSED INJECTION WELL

Well Name: Vince BGH No. 1 Field: Wildcat
 Location: 1980' ESL & 1750' FEL Sec. 30-9S-35E Lea Co, NM
 GL: 4165' Zero: _____ AGL: _____ KB: 4183'
 Spud Date: 4/25/05 Completion Date: _____
 Comments: _____

Casing Program	
Size/Wt/Grade/Conn	Depth Set
13 3/8" 48# H40	426'
9 5/8" 36 & 40 # J55	4149'
7" 26# J55, L80, HCP110	12650'



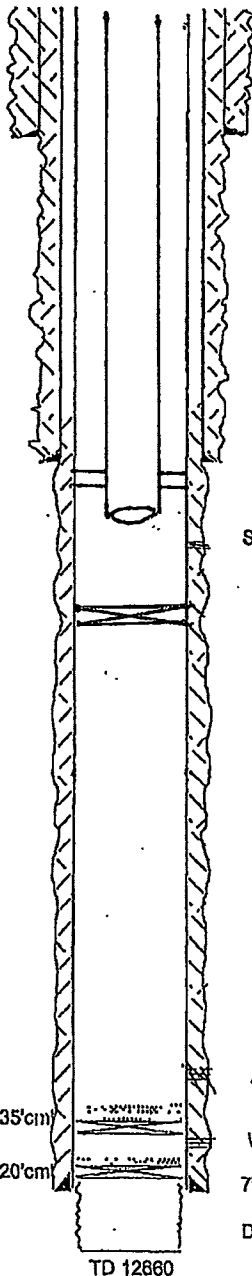
SKETCH NOT TO SCALE

DATE: 09/20/2021

PROPOSED WELLBORE DIAGRAM PROPOSED INJECTION WELL

Well Name: Vince BGH No. 1 Field: Wildcat
 Location: 1980' ESL & 1750' FEL Sec. 30-9S-35E Lea Co, NM
 GL: 4165' Zero: _____ AGL: _____ KB: 4183'
 Spud Date: 4/25/05 Completion Date: _____
 Comments: _____

Casing Program	
Size/Wt/Grade/Conn	Depth Set
13 3/8" 48# H40	426'
9 5/8" 36& 40# J55	4149'
7" 26# J55, L80, HCP110	12650'



13 3/8" csg @ 426'. Cmtd w/ 440 sx. Cmt circ.

TOC 3645' by calc.

9 5/8" csg @ 4149'. Cmtd w/ 1303 sx. Cmt circ.

San Andres perms 4840'-50'

RBP at 4921

PROPOSED INJECTION

Use Existing Perfs at 4840 to 4850 feet
 Set Arrowset 1-X packer at 4750 feet.
 2 7/8" tubing to 4800 feet.

Atoka perms 11607-21' & 11655-64' SQUEEZED

Woodford Sand perms 12534-12592'

7" csg @ 12650', Cmtd 1st slg w/ 165 sx. Cmtd 2nd slg w/ 2090 sx.

Devonian open hole.

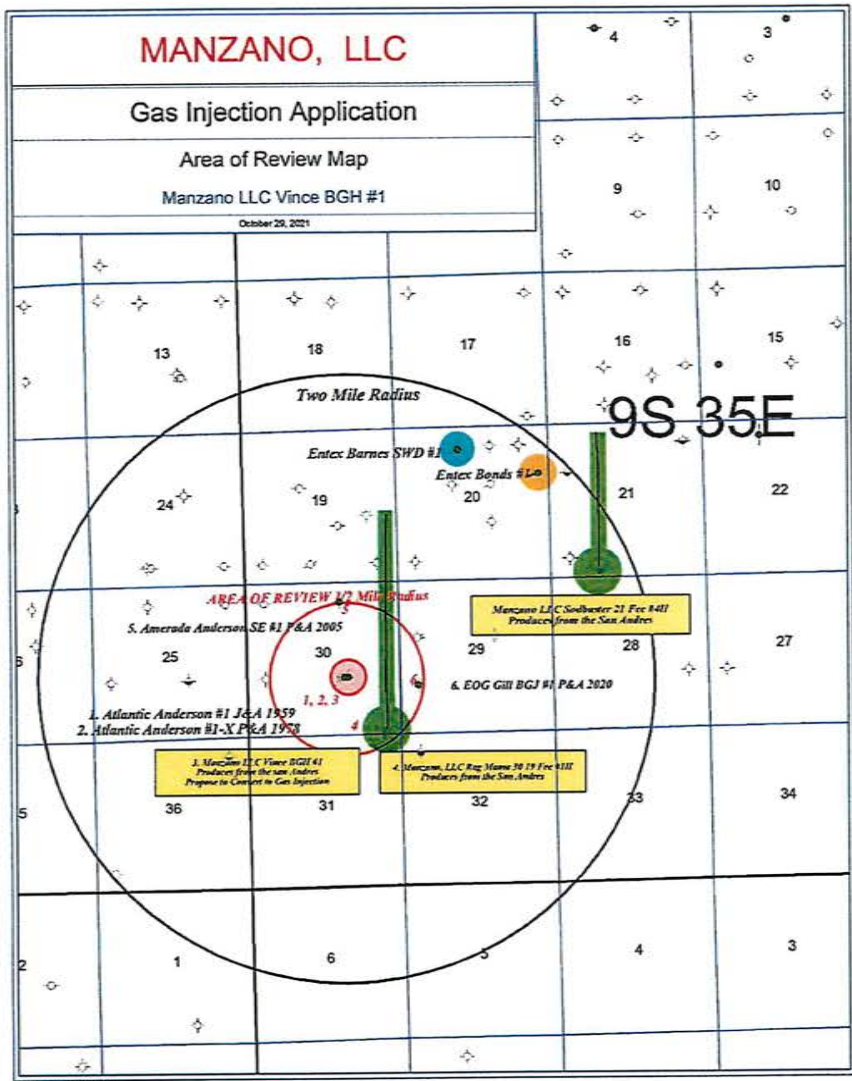
CIBP@12500'+35'cm

CIBP@12620'+20'cm

TD 12860

SKETCH NOT TO SCALE

DATE: 09/20/2021...



Manzano is applying to inject gas produced from the Manzano Sodbuster 21 Fee #4H and Manzano Rag Mama 30 19 Fee #1H wells into the Vince BGH #1 well. All three wells are currently perforated in the same P-1 dolomite reservoir. The two source wells currently produce a total of 59 BOPD, 129 MCFGPD and 1068 BWPD. Produced water is disposed in the Entex Barnes SWD #1 well. Gas is currently flared due to a lack of a pipeline. The proposed injection well, currently produces 2 BOPD and 31 BWPD and is deemed uneconomic. The purpose of this application is to comply with the new flare rule, while preventing waste, and recovering more oil from the reservoir by increasing the reservoir pressure.

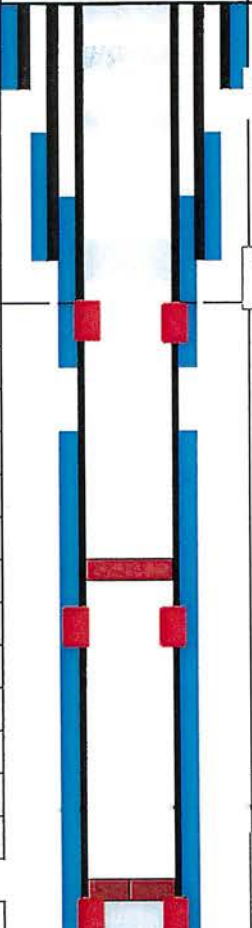
TABLE OF WELL DATA

WELL ID#	1	2	3	4	5	6
API NUMBER	30-025-02666	30-025-02667	30-025-37104	30-025-44067	30-025-20488	30-025-37103
OPERATOR	ATLANTIC REFINING CO	ATLANTIC REFINING CO	MANZANO, LLC	MANZANO, LLC	AMERADA PETROLEUM	EOG RESOURCES
LEASE NAME	ANDERSON	ANDERSON	VINCE BGH	RAG MAMA 30-19 FEE	ANDERSON SE	GILL BGJ
WELL#	1	1-X	1	1H	1	1
WELL TYPE	DRY HOLE	OIL	OIL	OIL	OIL WELL	OIL WELL
STATUS	P&A	P&A	ACTIVE	ACTIVE	P&A	P&A
FOOTAGES	1980 FSL, 1980 FEL	1980 FSL, 1880 FEL	1980 FSL, 1750 FEL	25 FSL, 528 FEL	660 FNL, 1980 FEL	1650 FSL, 660 FWL
SURFC UNIT	J	J	J	P	C	L
SECTION	30	30	30	30	30	29
TOWNSHIP	95	95	95	95	95	95
RANGE	35E	35E	35E	35E	35E	35E
SPUD DATE	2/1/1959	3/1/1959	4/25/2005	11/30/2017	1/15/1963	8/1/2005
TRUE VERTICAL DEPTH	4752	10025	12,655	4847	12,690	12,670
MEASURED DEPTH	4752	10025	12,655	12,160	12,690	12,670
1st STRING HOLE SIZE	17 1/2"	17 1/2"	17 1/2"	12 1/4"	17 1/2"	17 1/2"
CASING SIZE	13 3/8"	13 3/8"	13 3/8"	8 5/8"	13 3/8"	13 3/8"
SET AT	436	408	426	2268	400	420
SX CMT	375	375	240	950	500	440
CMT TO	SURFACE	SURFACE	SURFACE	SURFACE	SURFACE	SURFACE
HOW MEASURED	CIRCULATED	CIRCULATED	CIRCULATED	CIRCULATED	CIRCULATED	CIRCULATED
2ND STRING HOLE SIZE	12 1/4"	12 1/4"	12 1/4"	7 7/8"	11"	12 1/4"
CASING SIZE	9 5/8"	9 5/8"	9 5/8"	5.5"	8 5/8"	9 5/8"
SET AT	4350	4333	4145	12160	4315	4170
SX CMT	1600	1500	1103	2100	1400	1575
CMT TO	1475	1350	SURFACE	SURFACE	2417	SURFACE
HOW MEASURED	TEMP. SURVEY	TEMP. SURVEY	CIRCULATED	CIRCULATED	TEMP. SURVEY	CIRCULATED
3RD STRING HOLE SIZE	NONE	7 7/8"	8 3/4"	NONE	7 7/8"	8 3/4"
CASING SIZE	NONE	5 1/2"	5 1/2"	NONE	7" 0 TO 9952	5 1/2"
SET AT	NONE	5050	12650	NONE	5 1/2' 9952 TO 12688	12660
SX CMT	NONE	325	1420	NONE	800	3400
CMT TO	NONE	NONE	3645	NONE	7833	3670
HOW MEASURED	NONE	NONE	CALCULATED	NONE	TEMP. SURVEY	CALCULATED
CURRENT COMPLETION, MD	NONE	NONE	4840 TO 4850	5250 TO 12123	NONE	NONE
CURRENT COMPLETION, TVD	JUNKED & ABANDONED	NONE	4840 TO 4850	4847 TO 4804	NONE	NONE
PRIOR COMPLETION DEPTHS	NONE	4846 to 4866 (San Andres)	12534 TO 12592	NONE	4771 to 4901	11603 TO 11877
PRIOR COMPLETION DEPTHS			11607 TO 11664		9737 TO 9755	
PRIOR COMPLETION DEPTHS					12634 TO 12655	
P&A INFORMATION	SET RETAINER AT 4151 SQUEEZED 200 SXS INTO PARTED CASING AT 4245 5 SXS ON RETAINER CUT OFF WELLHEAD WELD PLATE ON TOP	250 sxs CMT 10025 to 9347 75 sxs cmt 5200 to 5050 30 sxs cmt plug 4620 to 4880 shot off 9 5/8" csg at 630 feet 35s sxs CMT 646 to 608 5 sxs CMT, TOC at 485 50 sxs cmt TOC at 385 50 sxs CMT TOC at 340 CUT OFF WELLHEAD WELD PLATE ON TOP 12/05/1973 1st time	WELLBORE DIAGRAM ATTACHED		CIBP set at 12,584 Retainer set at 8175 ft Perf at 4300 and 4985, Sqzd 120 sxs 4300-4985 50 SXS CMT 4200 TO 4090 60 SXS CMT 2260 TO 2058 60 SXS CMT 525 TO 378 45 SXS CMT 60 TO SURF	SET CIBP AT 12615 30 SXS CMT 12377 TO 12615 55 SXS CMT 11934 TO 11487 25 SXS CMT 10056 TO 9853 30 SXS CMT 7786 TO 7542 25 SXS CMT 5521 TO 5268 40 SXS CMT 4282 TO 3877 25 SXS CMT 2887 TO 2634 25 SXS CMT 523 TO 270 40 SXS CMT 270 TO SURF CUT OFF WELLHEAD
P&A DATE	3/5/1959	8/7/1978	ACTIVE WELL	ACTIVE WELL	6/16/2005	4/16/2020

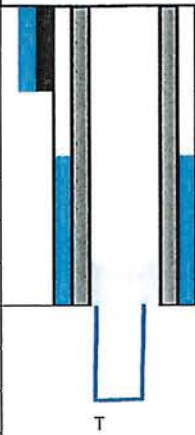
General	Company: <i>EOG RESOURCES</i>		Prospect: <i>JENKINS</i>		
	Well Name: <i>GILL BGJ #1</i>		TD (MD/TVD): <i>12670</i>		
	County: <i>LEA</i>		Elevation: <i>4175 (KB)</i>		
	State: <i>NEW MEXICO</i>		Latitude & longitude:		
	API Number: <i>30-025-37103</i>		Section-Township-Range: <i>29-T9S-R35E</i>		
			Surface Location: <i>1650 Fsl, 660 Fel</i>		
		Bottom Hole Location: <i>Same</i>			
DIRECTIONS:					
FORMATION	PERFS	Casing Profile	Hole Size	Casing Specifications	P&A INFORMATION
			17 1/2" 13 3/8" set at 420		P&A 4/16/2020. Cut off Wellhead 40 sxs 270 to surface 25 sxs 523 to 270
					25 sxs 2887 to 2634
					40 sxs 4282 to 3877
			12 1/4" 9 5/8" set at 4170. CMT with 1575 sxs to surf.		25 sxs 5521 to 5268
					30 sxs 7786 to 7542
					25 sxs 10056 to 9853
<i>Atoka</i>	<i>11603 11877</i>				55 sxs 11934 to 11486
<i>Devonian (OH)</i>	<i>12660 12670</i>			8 3/4" 5 1/2" to 12660. Cmt with 3400 sxs TOC 3670 calculated. TD 12670	30 sxs 12377 to 12615 CIBP at 12615
Comments	<i>This well produced 160,828 BO, 1,968 MCFG and 8,083,377 BW from the Devonian.</i>				
	<i>It produced 1611 BO, 136,796 MCFG and 180 BW from Atoka perforations.</i>				
	<i>It was plugged and abandoned in 2020.</i>				

General	Company:	AMERADA PETROLEUM	Prospect:	JENKINS
	Well Name:	ANDERSON SE #1	TD (MD/TVD):	12690
	County:	LEA	Elevation:	4187 (KB)
	State:	NEW MEXICO	Latitude & longitude:	
	API Number:	30-025-20488	Section-Township-Range	30-T9S-R35E
			Surface Location:	660 Fnl, 1980 Fel
		Bottom Hole Location:	Same	

DIRECTIONS:

FORMATION	PERFS	Casing Profile	Hole Size	Casing Specifications	P&A INFORMATION
			17 1/2" 13 3/8" set at 400		P&A 6/16/2005. Cut off Wellhead 45 sxs 60 to surface 60 sxs 525 to 378
					60 sxs 2260 to 2058
					50 sxs 4200 to 4090
San Andres	4771 4901		11"	8 5/8" set at 4315. Cmt 1400 sxs TOC at 2417	
				1982 Perf 4300 and 4985 and pump 120 sxs cement squeeze behind 7".	
					Retainer set at 8175 ft
Devonian	12634 12655		7 7/8"	Ran 7" to 9922 5 1/2" 9922 to TD Cmt with 800 sxs TOC 7833 calculated.	CIBP at 12504 Perf

Comments	<i>This well produced 10,189 BO, 4,1728 MCFG and 583,704 BW from the Devonian.</i>
	<i>It produced 661,189BO, 1,016,582 MCFG and 451,416 BW from Cisco perforations.</i>
	<i>Last, it produced 459 BO from the San Andres.</i>
	<i>It was plugged and abandoned in 2005.</i>

General	Company: <i>Atlantic Refining</i>		Prospect: <i>Jenkins</i>			
	Well Name: <i>Anderson #1</i>		TD (MD/TVD): <i>4752</i>			
	County: <i>Lea</i>		Elevation: <i>4175 (DF)</i>			
	State: <i>New Mexico</i>		Latitude & longitude:			
	API Number: <i>30-025-02666</i>		Section-Township-Range: <i>30-T9S-R35E</i>			
			Surface Location: <i>1980 FSL, 1980 FEL</i>			
			Bottom Hole Location: <i>1980 FSL, 1980 FEL</i>			
DIRECTIONS:						
Formation	Depth		Casing Profile	Hole Size	Casing Specifications	P&A Info.
	MD	TVD				
						3-5-1959 Cut off wellhead weld plate on top Skid rig to Anderson 1-X
				17 1/2	Set 13 3/8 at 426 feet. Cement with 426 sxs	
				12 1/4	Set 9 5/8" at 4350 feet. Cement with 1500 sxs TOC at 1475 by Temp.	Casing parted at 4275. Squeezed part with 200 sxs cmt.
			Surv.	7 7/8"	J&A 4752 ft TD	Junked and abandoned at TD of 4753 feet.
Comments	No completion attempted after intermediate casing parted and the well was junked and abandoned.					

General	Company:	Atlantic Refining	Prospect:	Jenkins
	Well Name:	Anderson #1-X	TD (MD/TVD):	10,025
	County:	Lea	Elevation:	4175 (DF)
	State:	New Mexico	Latitude & longitude:	
	API Number:	30-025-02667	Section-Township-Range	30-T9S-R35E
			Surface Location:	1980 FSL, 1880 FEL
		Bottom Hole Location:	1980 FSL, 1880 FEL	

DIRECTIONS:

ZONE of	Depth		Casing Profile	Hole Size	Casing Specifications	P&A Info.
PERFS				17 1/2	Set 13 9/8 at 408 feet. Cement with 375 sxs Circ Cement to surface	P&A 8/7/1978 Cut off well hellhead 50 sxs TOC at 385 50 sxs TOC at 440 Cut 9 5/8 at 630 feet. 35 sxs 646 to 608.
				12 1/4	Set 9 5/8" at 4333 feet. Cement with 1500 sxs TOC at 1350 by Temp. Surv.	30s sxs 4620 to 4880
San Andres	4846	4866		7 7/8"	Set 50 sxs at 5050 to 5200 ft Ran 5/12" casing liner 4272 to 5050 feet. Cement with 325 sxs 250 sxs plug 10025 to 9347	
					TD 10,025 Did not run pipe to TD	

Well produced 11,352 BO 7454 MCFG and 22769 BW fom San Andres 4846 to 4866.
 It was originally plugged and abandoned 12/05/1973.
 It was reentered in 1973 but operator could not tie onto 9 5/8" casing stub and was replugged 8/7/1978 as shown.

General	Company: Manzano, LLC	Prospect: Jenkins
	Well Name: Rag Mama 30-19 Fee #1H	TD (MD/TVD): 12160' MD/4850' TVD
	County: Lea	Elevation: 4159' GL & 4180' KB (21'KB)
	State: New Mexico	Latitude & longitude: 103.393294/33.498036
	API Number: 30-025-44067	Section-Township-Range: 30-9S-35E
		Surface Location: 25' FSL & 528' FEL-Sec 30-9s-35e
	Bottom Hole Location: 2310' FSL & 400' FEL-Sec 19-9s-35e	

DIRECTIONS: From Tatum, NM go north on Hwy 206 to Crossroads, @ Crossroads turn west onto CR170/Carrol Road, Go west on CR170 for 3 miles & turn south onto lease road, Go south on dirt road for 1.0 miles thru cattleguard the follow road 0.2 miles to location

Formation	Depth		Casing Profile	Hole Size	Casing Specifications	Mud Program
	MD	TVD				
						0'-3500': MW 8.4-10+, Vis 30-32, WL 15
Top Rustler	2240	2240		12 1/4"	12 1/4" Ulterra U616S 8 5/8" 32H/ft J-55 LTC to 2275'	Cement w/750sx 35:65:6 (12.9ppg/1.87cfs/10.11gps) + 200sx "C" (14.8ppg/1.33cfs/6.33gps)
8 5/8" Casing @ 2275'						
Yates	2760	2760				2275'-KOP @ 4200': MW 10+, Vis 28-32, WL n/c
Queen	3470	3470		7 7/8"	7 7/8" Ulterra U616M	Cement 5 1/2" w/1100sx 50:50:10 C (11.00ppg/2.81cfs) + 1000sx 50:50:2 C (14.5ppg/1.22cfs)
San Andres	4040	4040				
KOP	4265	4265		CURVE 7 7/8"	7 7/8" Ulterra U616M 5.5" 20.0# L80 BTC to Surface	KOP- EOL @ : MW 10+, Vis 30-32, WL n/c Curve: 4265'-5170' (905')
Pi Marker	4620	4600				
Top Pay Zone	4880	4770				
End of Curve	5170	4840				
End of lateral	12160	4805		LATERAL 7 7/8"	7 7/8" Ulterra U616M 5.5" 20.0# L80 BTC to Surface	TD Lateral @ 12160' MD/4805' TVD Lateral: 5180' - 12180' MD (6990')

Comments	



Certificate of Analysis
 Number: 6030-21070001-001A

Artesia Laboratory
 200 E Main St.
 Artesia, NM 88210
 Phone 575-746-3481

Manzano Energy
 Manzano Energy
 300 W 2nd St
 Roswell, NM 88201

July 01, 2021

Station Name: Rag Mamma Heater
 Station Number: Heater treater
 Station Location: Manzano
 Sample Point: Heater Ball Valve
 Instrument: 6030_GC6 (Inficon GC-3000 Micro)
 Last Inst. Cal.: 06/28/2021 0:00 AM
 Analyzed: 07/01/2021 10:35:01 by EJR

Sampled By: Cameron Rivera
 Sample Of: Gas Spot
 Sample Date: 06/30/2021 09:30
 Sample Conditions: 20 psig Ambient: 70 °F
 Effective Date: 06/30/2021 09:30
 Method: GPA-2261M
 Cylinder No: 5030-00488

Analytical Data

Components	Un-normalized Mol %	Mol. %	Wt. %	GPM at 14.696 psia		
Hydrogen Sulfide	0.000	2.10000	2.716		GPM TOTAL C2+	5.858
Nitrogen	4.465	4.45505	4.735		GPM TOTAL C3+	3.496
Methane	60.630	60.49464	36.823		GPM TOTAL iC5+	1.054
Carbon Dioxide	13.129	13.09975	21.874			
Ethane	8.833	8.81352	10.055	2.362		
Propane	5.586	5.57395	9.326	1.539		
Iso-butane	0.829	0.82725	1.824	0.271		
n-Butane	2.005	2.00043	4.412	0.632		
Iso-pentane	0.693	0.69106	1.892	0.253		
n-Pentane	0.667	0.66571	1.822	0.242		
Hexanes Plus	1.282	1.27864	4.521	0.559		
	98.119	100.00000	100.000	5.858		

Calculated Physical Properties	Total	C6+
Relative Density Real Gas	0.9138	3.2176
Calculated Molecular Weight	26.36	93.19
Compressibility Factor	0.9955	
GPA 2172 Calculation:		
Calculated Gross BTU per ft³ @ 14.696 psia & 60°F		
Real Gas Dry BTU	1138	5129
Water Sat. Gas Base BTU	1118	5040
Ideal, Gross HV - Dry at 14.696 psia	1132.7	5129.2
Ideal, Gross HV - Wet	1112.7	5039.7

Comments: H2S Field Content 2.1 %

Data reviewed by: Eric Ramirez, Analyst

Quality Assurance: The above analyses are performed in accordance with ASTM, UOP, GPA guidelines for quality assurance, unless otherwise stated.



Certificate of Analysis
 Number: 6030-21070001-003A

Artesia Laboratory
 200 E Main St.
 Artesia, NM 88210
 Phone 575-746-3481

Manzano Energy
 Manzano Energy
 300 W 2nd St
 Roswell, NM 88201

July 01, 2021

Station Name: Sodbuster Heater	Sampled By: Cameron Rivera
Station Number: Heater Treater	Sample Of: Gas Spot
Station Location: Manzano	Sample Date: 06/30/2021 09:15
Sample Point: Heater Ball Valve	Sample Conditions: 20 psig Ambient: 70 °F
Instrument: 6030_GC6 (Inficon GC-3000 Micro)	Effective Date: 06/30/2021 09:15
Last Inst. Cal.: 06/28/2021 0:00 AM	Method: GPA-2261M
Analyzed: 07/01/2021 11:34:42 by EJR	Cylinder No: 1111-002209

Analytical Data

Components	Un-normalized Mol %	Mol. %	Wt. %	GPM at 14.696 psia	
Hydrogen Sulfide	0.000	2.40000	2.991		GPM TOTAL C2+ 5.431
Nitrogen	7.990	8.17264	8.371		GPM TOTAL C3+ 3.311
Methane	54.324	55.56411	32.591		GPM TOTAL IC5+ 1.185
Carbon Dioxide	15.374	15.72463	25.302		
Ethane	7.736	7.91305	8.700	2.120	
Propane	4.769	4.87800	7.865	1.346	
Iso-butane	0.670	0.68499	1.456	0.225	
n-Butane	1.716	1.75559	3.731	0.555	
Iso-pentane	0.559	0.57135	1.507	0.209	
n-Pentane	0.600	0.61360	1.619	0.223	
Hexanes Plus	1.684	1.72204	5.867	0.753	
	95.422	100.00000	100.000	5.431	

Calculated Physical Properties	Total	C6+
Relative Density Real Gas	0.9482	3.2176
Calculated Molecular Weight	27.35	93.19
Compressibility Factor	0.9956	
GPA 2172 Calculation:		
Calculated Gross BTU per ft³ @ 14.696 psia & 60°F		
Real Gas Dry BTU	1059	5129
Water Sat. Gas Base BTU	1041	5040
Ideal, Gross HV - Dry at 14.696 psia	1054.6	5129.2
Ideal, Gross HV - Wet	1036.0	5039.7

Comments: H2S Field Content 2.4 %

Data reviewed by: Eric Ramirez, Analyst

Quality Assurance: The above analyses are performed in accordance with ASTM, UOP, GPA guidelines for quality assurance, unless otherwise stated.

SOURCE WELL

Manzano, LLC
Rag Mama 30-19
19880 FSL
1750 FEL

South

TATEZ PETROLEUM CORPORATION
CELL BLOCK
12

Manzano, LLC
Vince BGH #1
Sec.30-T9S-R35E
1980 FSL, 1750 FEL

FLKOS COMPANY
ANDERSON
A-1
67

MANUEL O
ANDERSON
1-19
104

MANUEL O
ANDERSON
1-19
104

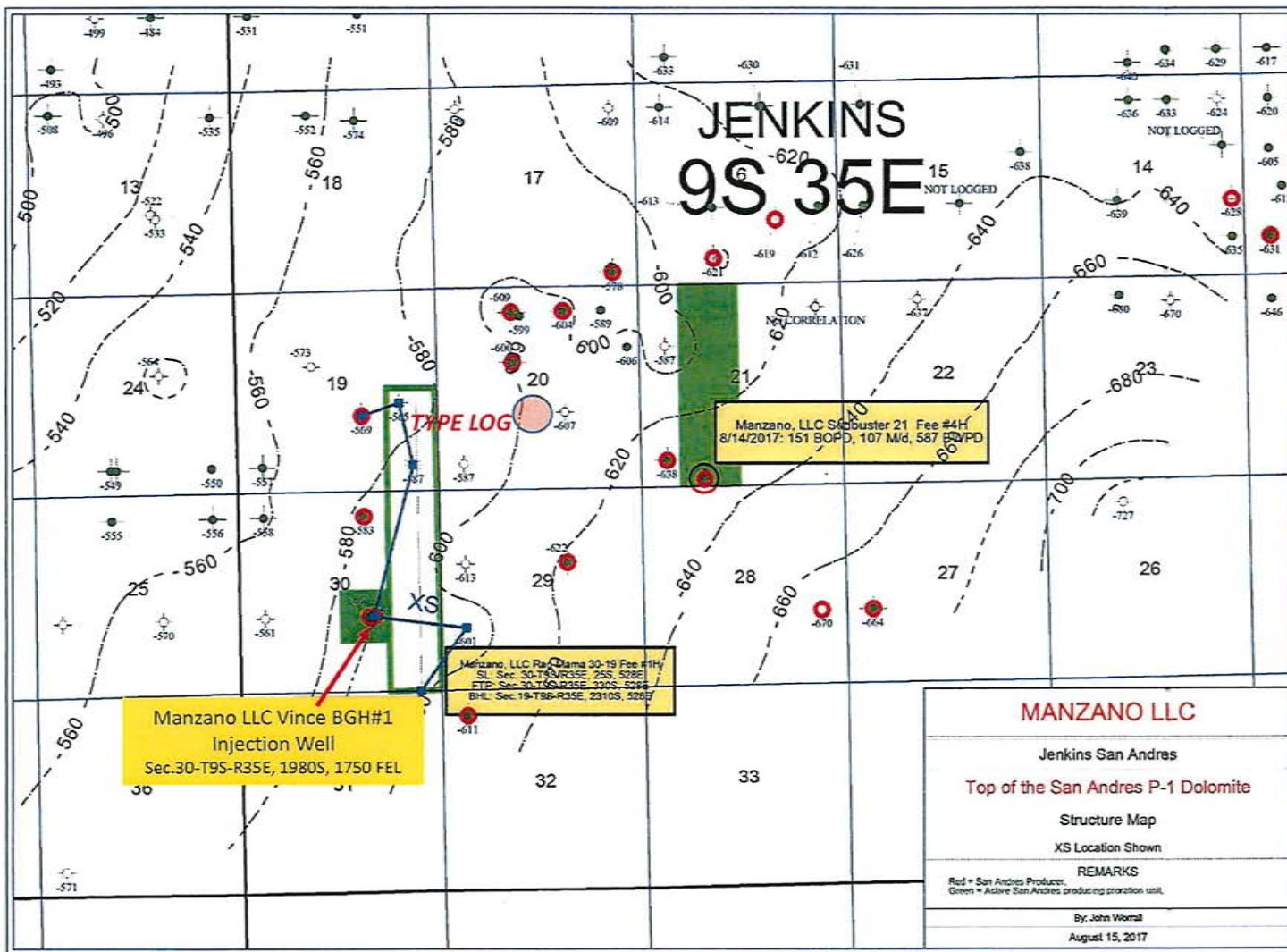
North

The Rag Mama 30-19 Fee 21H lateral is a San Andres P-1 dolomite, which is located approximately 140 feet below the San Andres Pi Marker. From 25 wells in the map area, the P-1 dolomite has an average of 78.5 feet of porosity.



INJECTION WELL

VIII. This is a south to north stratigraphic cross section depicting the logs of the vertical wells adjacent to the Rag Mama 30 19#1H lateral. The location of these wells is shown on the P-1 dolomite isopach and structure map. The gas will be injected into the San Andres P-1 dolomite in existing perforations at 4840 to 4850 feet in the Manzano LLC Vince BGH#1. The well will be converted to injection; it currently produces 2 BOPD and 31 BWPD. The San Andres formation is present from 4000 to 5460 feet in this well. Shown on this cross section is the San Andres Pi Marker, a regional volcanic ash bed which is the datum for the cross section. The P-1 dolomite (yellow) is a fine crystalline dolomite reservoir, with typically 4 to 12% porosity, and 20 to 100 ohm-m of resistivity. The interval can exhibit up to 100 feet of porosity > 6% (see isopach map). Oil and gas is stratigraphically trapped where this reservoir pinches out northward into anhydrite. The zone is also overlain by anhydrite, and underlain by tight limestone.

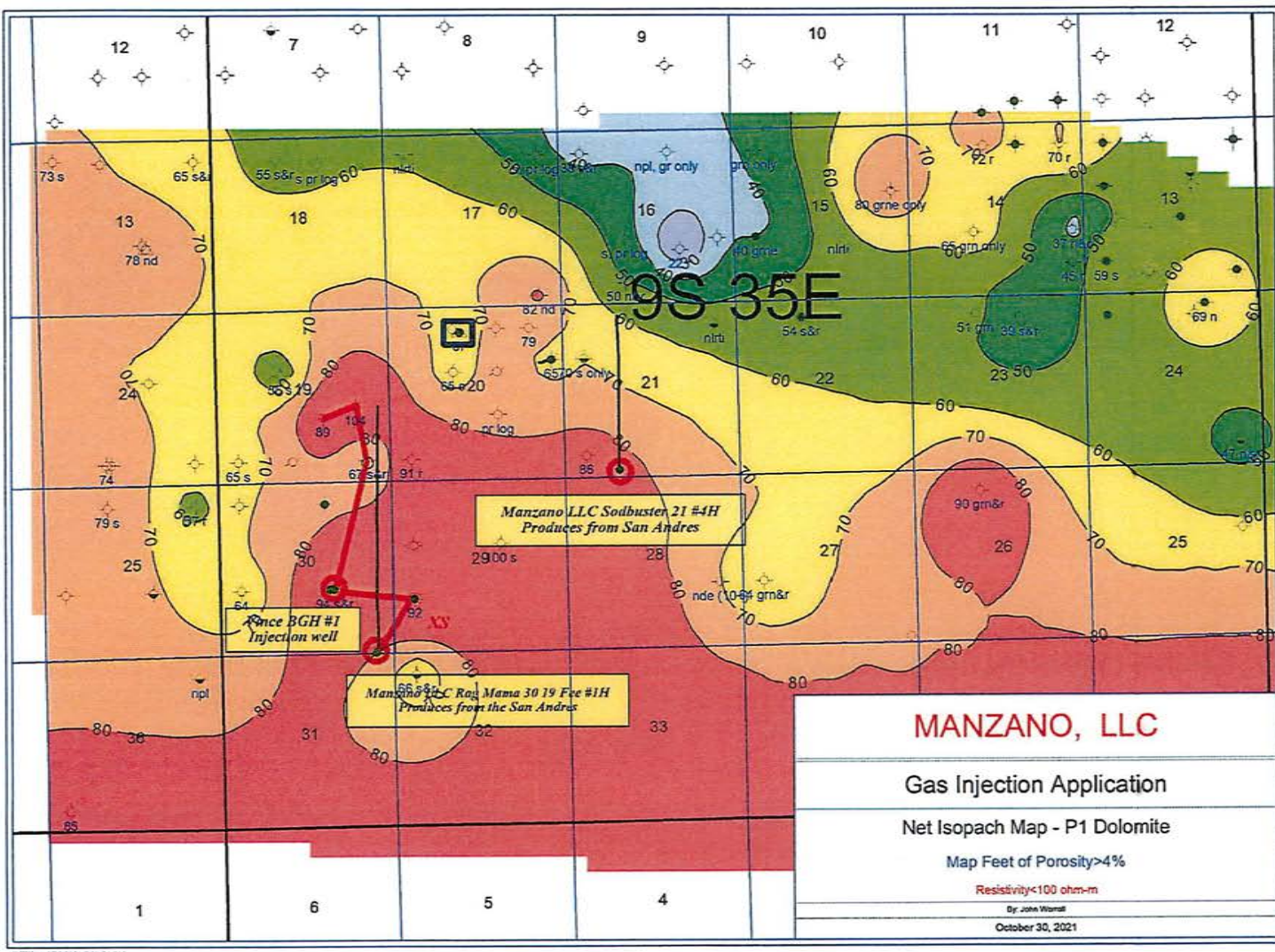


VIII. GEOLOGY

This is a structure map on top of the P-1 dolomite showing the reservoir is relatively flat with only 40 feet of east dip per mile (a half degree slope).

Wells in red have historically produced oil or gas from this reservoir, or exhibit shows. Currently, Manzano produces oil from the two horizontal wells and the Vince #1. The other red wells have been plugged and abandoned.

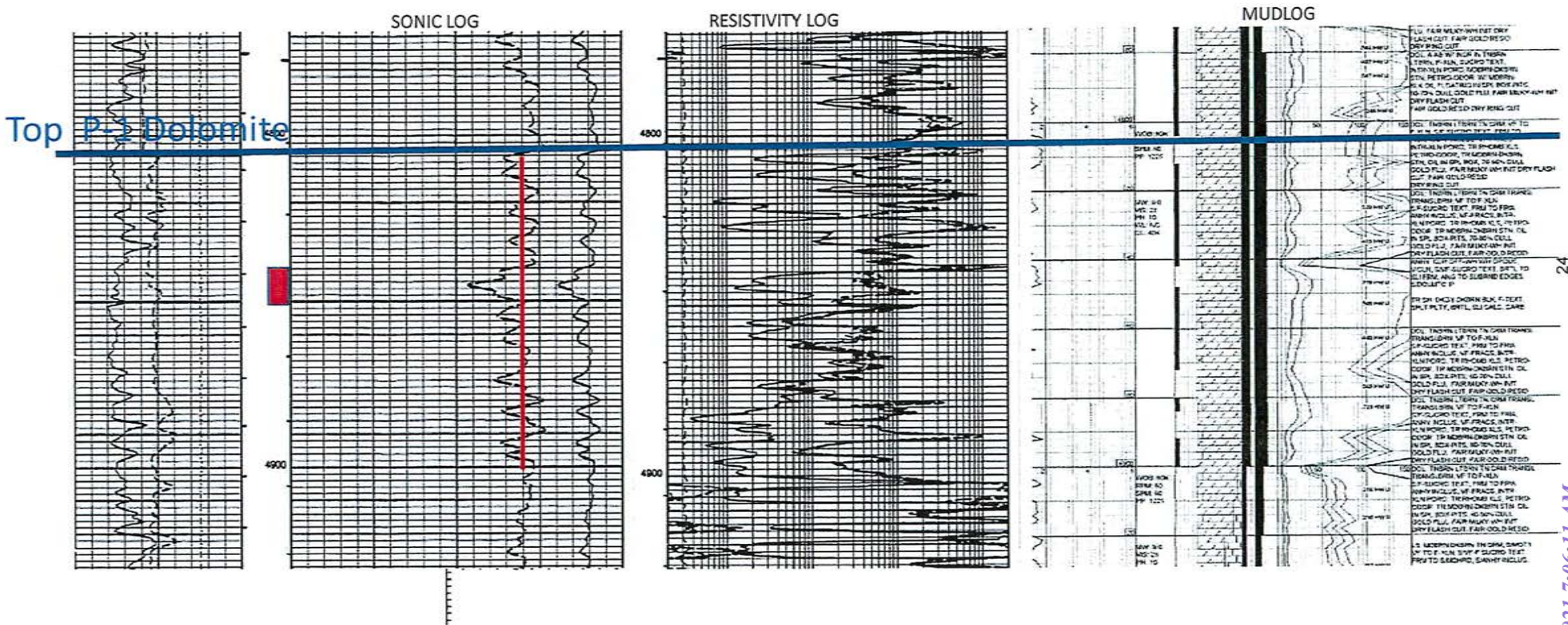
The location of the cross section is shown on this map.

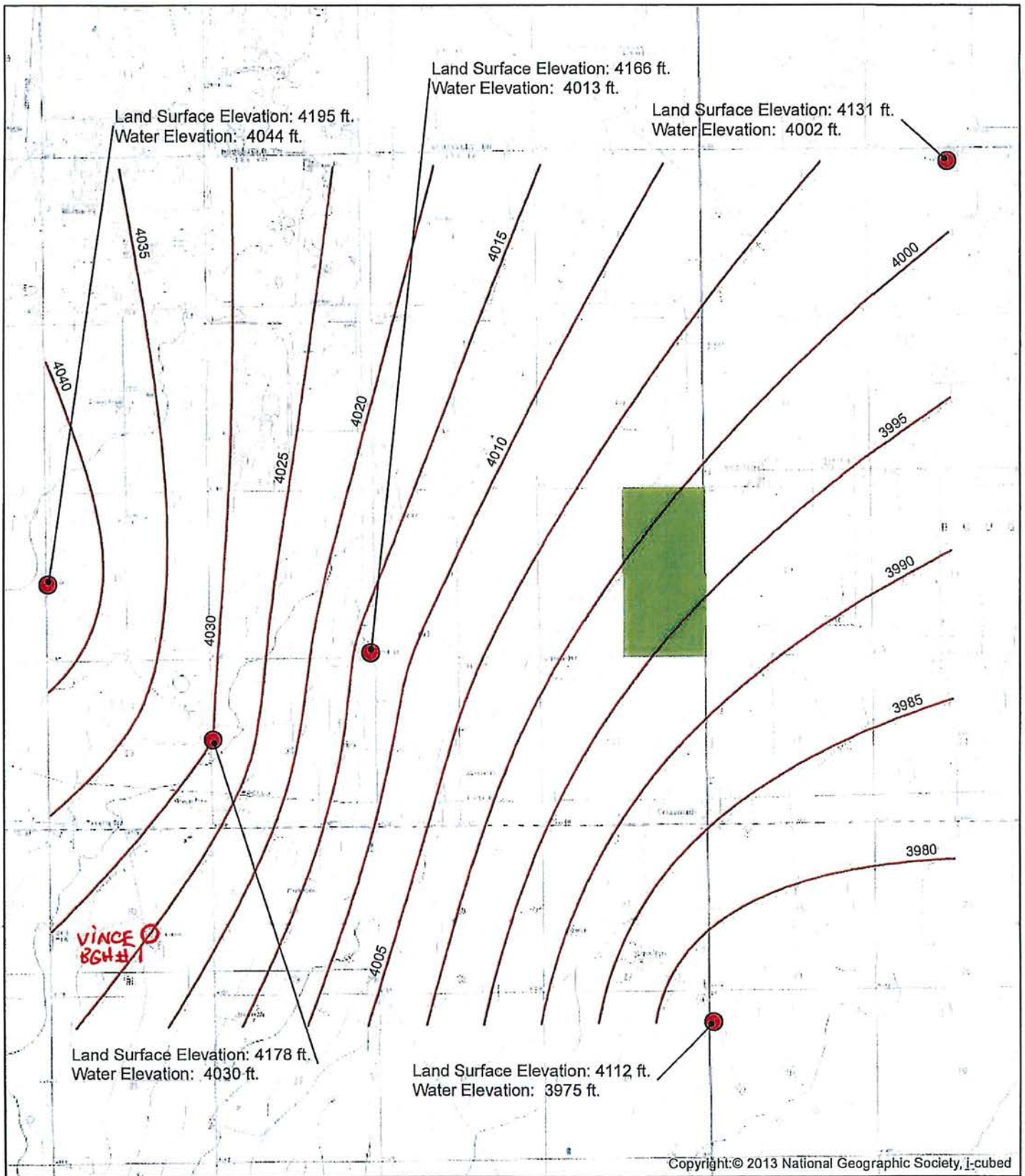


This is a net isopach of the P-1 dolomite showing feet of porosity >4% and/or resistivity log showing < 100 ohm-m. It shows the P-1 dolomite has up to 100 feet of reservoir. Northward the zone is present but porosity grades into tight anhydrite and anhydrite filled dolomite, which sets up the stratigraphic trap.

The cross section location is shown along with the injection well and the two source wells.

X. Log Data of the Manzano Vince BGH #1 located in Section 30-T9S-R35E, 1980 Fsl, 1750 Fel. Injection will be through existing perforations at 4840 to 50 feet. Logs show the pay is a dolomite with good porosity and resistivity from 4810 to 4900 ft.



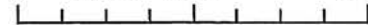


Legend

- Manzano Fee Land
- Water Levels
- NMOSE Well-Schedule Wells

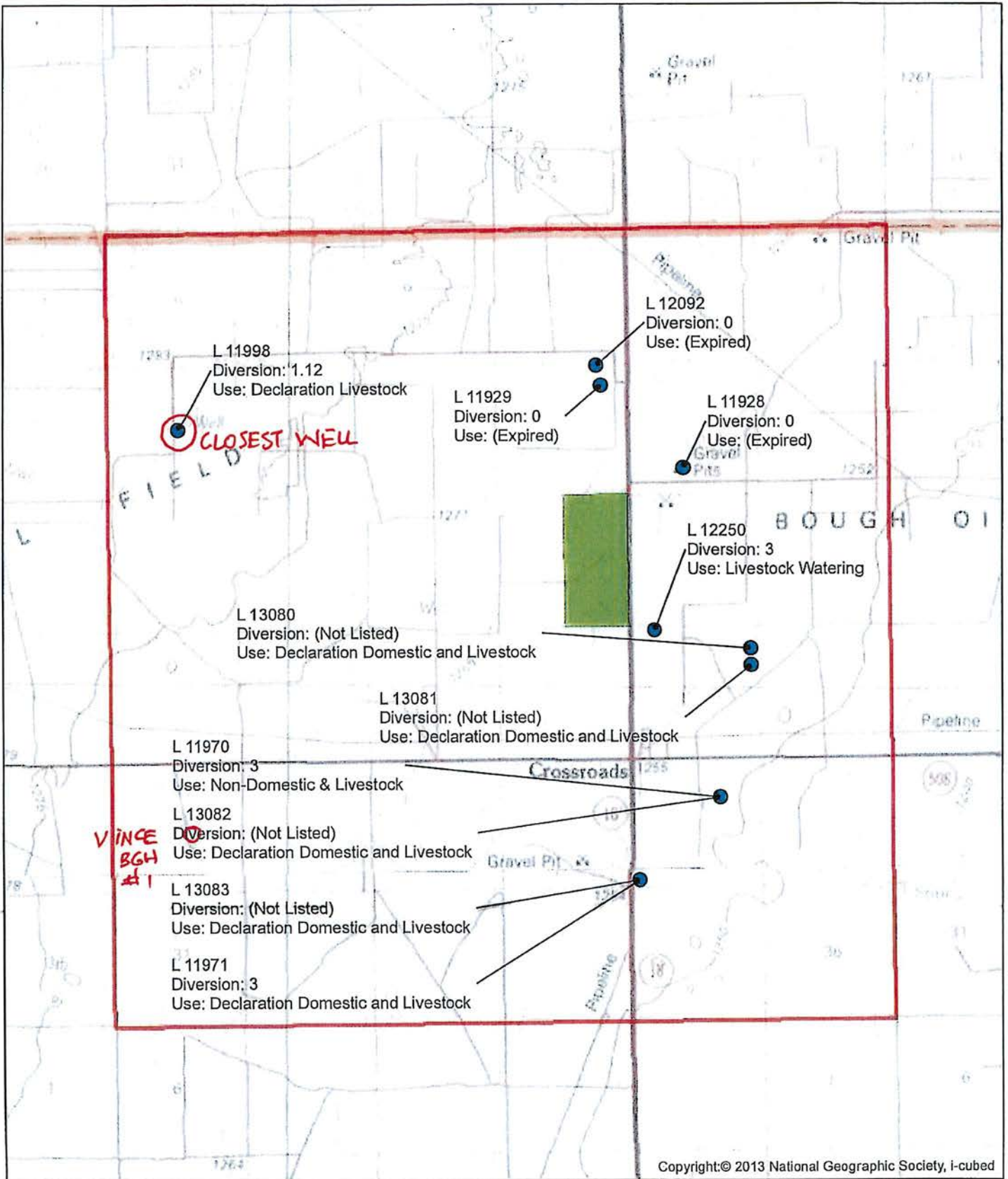


0 2,000 4,000 8,000 Feet



1 inch = 4,000 feet

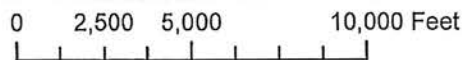
FIGURE 4
Water Elevation from 1996
NMOSE Well-Schedule Records
04/22/2016



Copyright:© 2013 National Geographic Society, i-cubed

Legend

- Manzano Fee Land
- NMOSE DB Wells
- Township 9S Range 35 E N.M.P.M.



1 inch = 5,000 feet
26

FIGURE 3
NMOSE DB Wells
04/22/2016



LEGAL NOTICE October 1, 2021

Manzano, LLC of P.O. Box 1737 Roswell, NM has filed an application with the New Mexico Oil Conservation Division to inject gas into the Manzano, LLC Vince BGH #1 well for the purpose of reservoir pressure maintenance. The well is located at Section 30-T9S-R35E, 1980 from south line, and 1750 from east line in Lea County, New Mexico. Gas will be injected in the San Andres dolomite at 4840 to 4850 feet at maximum rate of 1000 MCFGPD and a maximum pressure of 950 psi. Interested parties may file objections or requests for hearing with the Oil Conservation Division, 1220 South St. Francis Drive, Santa Fe, New Mexico 87505, within 15 days. Should you have any questions please contact John Worrall at Manzano, LLC at 575-623-1996 ext. 302.
#36902

Advertising Invoice

Hobbs Daily News-Sun

201 N Thorp
 P. O. Box 850
 Hobbs, NM 88241
 Phone: 575-393-2123
 Fax: 575-397-0610
 URL: www.hobbsnews.com

1

KEN BARBIE
 MANZANO OIL CORPORATION
 P.O. BOX 2107
 ROSWELL, NM 88202-2107

Cust#: 01101555
 Ad #: 00259095
 Phone: (575)623-1996
 Date: 09/29/2021
 Salesperson: HA Ad Taker: Kayla

Sort Line: 36902 BGH#1

Class: 671

Description	Start	Stop	Ins.	Cost/Day	Amount
AFF2 Affidavits (Legals)					6.25
BOLD bold					1.00
07 07 Daily News-Sun	10/1/2021	10/1/2021	1	32.67	32.67

Ad Text:

LEGAL NOTICE
 October 1, 2021

Manzano, LLC of P.O. Box 1737 Roswell, NM has filed an application with the New Mexico Oil Conservation Division to inject gas into the Manzano, LLC Vince BGH #1 well for the purpose of reservoir pressure maintenance. The well is located at Section 30-T9S-R35E, 1980 from south line, and 1750 from east line in Lea County, New Mexico. Gas will be injected in the San Andres dolomite at 4840 to 4850 feet at maximum rate of 1000 MCFGPD and a maximum pressure of 950 psi. Interested parties may file objections or requests for hearing with the Oil Conservation Division, 1220 South St. Francis

Payment Reference:

Total:	39.92
Tax:	2.72
Net:	42.64
Prepaid:	0.00
Total Due	42.64

LEGAL NOTICE

Manzano, LLC of P.O. Box 1737 Roswell, NM has filed an application with the New Mexico Oil Conservation Division to inject gas into the Manzano, LLC Vince BGH #1 well for the purpose of reservoir pressure maintenance. The well is located at Section 30-T9S-R35E, 1980 from south line, and 1750 from east line in Lea County, New Mexico. Gas will be injected in the San Andres dolomite at 4840 to 4850 feet at maximum rate of 1000 MCFGPD and a maximum pressure of 950 psi. Interested parties may file objections or requests for hearing with the Oil Conservation Division, 1220 South St. Francis Drive, Santa Fe, New Mexico 87505, within 15 days. Should you have any questions please contact John Worrall at Manzano, LLC at 575-623-1996 ext. 302.



October 25, 2021

New Mexico Oil Conservation Division
Attention: Dylan Rose-Coss
Geological and Engineering Bureau
1220 South St. Francis Drive
Santa Fe, New Mexico 87505

Ladies and Gentlemen,

RE: Application to Inject Gas into the
Manzano, LLC Vince BGH State #1

The following statement is sent regarding the need for Seismicity Analysis for the proposed injection of gas into the caption well.

The injection gas will be placed back into the San Andres formation from which it comes. The maximum proposed injection pressure is 950 PSI, which will be in perforations from 4840 to 4850 feet in the Vince BGH State #1. This maximum pressure is only a .196 PSI/ft pressure gradient, which is well below the normal pressure gradient for the formation of .35 psi/ft, and way below the expected .9 to 1.0 psi/ft frac gradient for the formation. Second, the zone of injection is 8000 feet above the Precambrian Basement in this area. For both of these reasons, there is no need for an analysis of the potential for induced seismic activity in this area. Should you have any questions, regarding this issue or statement, please advise.

Sincerely,

John G. Worrall
Geologist

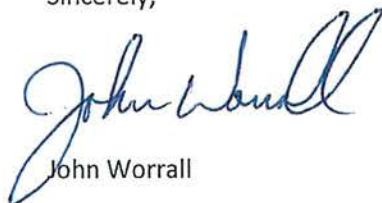
Form C-108 Item XII.

Manzano, LLC Vince BGH #1

AFFIDAVIT

Manzano, LLC has examined the geological and engineering data associated with the proposed injection well and find no evidence of open faults or other hydrologic connections between the injection zone and good sources of drinking water.

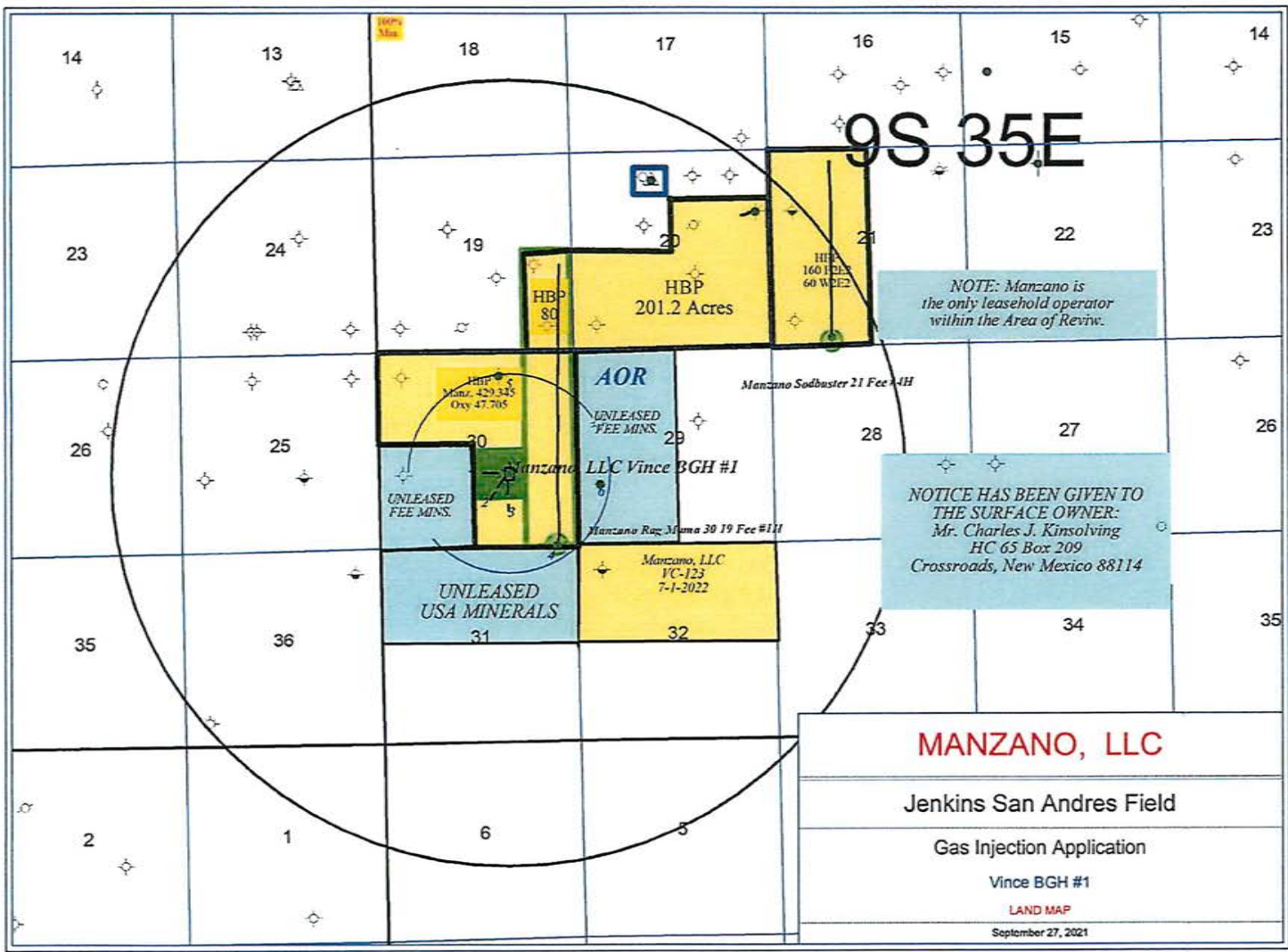
Sincerely,

A handwritten signature in blue ink that reads "John Worrall". The signature is written in a cursive style with a large, looping initial "J".

John Worrall

Partner

Manzano, LLC



XIV. This is a land map showing lease ownership of Manzano, LLC in yellow. Manzano, LLC is the only operator within the Area of Review. The surface owner of the Vince location, Charles Kinsolving, has been given notice, as has the Bureau of Land Management who owns unleased minerals in the N/2 of Section 31. See attached.

32



October 25, 2021


Bureau of Land Management
620 E. Greene Street
Carlsbad, NM 88220

To whom it may concern:

Attached for your notice is a copy of the permit filed with the New Mexico Oil Conservation Division, located at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. The Bureau of Land Management manages unleased minerals within the area of interest. In this application, Manzano, LLC is proposing to reinject gas at 4840 to 4850 feet in the San Andres formation in the Vince BGH #1, located at 1980 FSL, 1750 FEL, in Section 30 of T9S-R35E. Should you have any questions, please contact me or Mike Hanagan at 575-623-1996. Thank you.

Sincerely,

John Worrall
On behalf of Manzano, LLC

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: BLM 620 E. Greene St. Carlsbad, NM 88220  9590 9402 5491 9249 9341 08	B. Received by (Printed Name) J. Carrasco	C. Date of Delivery 10/26/21
2. Article Number (Transfer from service label) 7020 1290 0001 1523 8184	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
PS Form 3811, July 2015 PSN 7530-02-008-9053	3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation™	



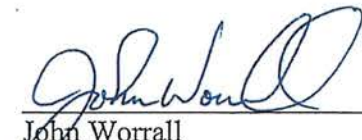
September 28, 2021

Mr. Charles J. Kinsolving
HC 65 Box 209
Crossroads, NM 88114

Mr. Kinsolving,

Attached for your notice is a copy of the permit filed with the New Mexico Oil Conservation Division, located at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. In this application, Manzano, LLC is proposing to reinject gas at 4840 to 4850 feet in the San Andres formation in the Vince BGH #1, located at 1980 FSL, 1750 FEL, in Section 30 of T9S-R35E, on surface lands owned by you. Should you have any questions, please contact me or Mike Hanagan at 575-623-1996. Thank you.

Sincerely,



John Worrall
On behalf of Manzano, LLC

7019 1640 0000 8684 9230

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Certified Mail Fee \$	
Extra Services & Fees (check box, add fee as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage \$	
Total Postage and Fees \$	
Sent To	Mr. Charles Kinsolving
Street and Apt. No., or PO Box No.	HC 65 Box 209
City, State, ZIP+4®	Crossroads, NM 88114
PS Form 3800, April 2015 PSN 7530 02-000 9047 See Reverse for Instructions	

ROSWELL, NM
SEP 28 2021
88201

**STATE OF NEW MEXICO
DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES
OIL CONSERVATION DIVISION**

**APPLICATION OF MANZANO LLC
FOR APPROVAL OF A PRESSURE
MAINTENANCE PROJECT AND
AUTHORIZATION TO INJECT,
LEA COUNTY, NEW MEXICO.**

CASE NO. 22357

**SELF-AFFIRMED STATEMENT
OF NICK C. MCCLELLAND**

1. I am the Land Manager at Manzano LLC (“Manzano”). I am over 18 years of age, have personal knowledge of the matters addressed herein, and am competent to provide this Self-Affirmed Statement. I have previously testified before the New Mexico Oil Conservation Division (“Division”), and my qualifications as an expert in petroleum land matters were accepted and made a matter of record.

2. I am familiar with the Application in this case and with the land matters pertaining to this Application. Copies of the application and proposed notice are attached as **Exhibit A-1**.

3. Manzano’s Application seeks an order: (1) approving a pressure maintenance project for the injection of produced gas through the Vince BGH #1 well into the Jenkins San Andres pool (Pool Code 33950) within the San Andres formation in a project area (“Project Area”) comprised of SE/4 of Section 30, Township 9 South, Range 35 East, NMPM, Eddy County, New Mexico; and (2) authorizing Manzano to convert the Vince BGH #1 well from a producing well to an injector.

4. Manzano operates the following described wells within or near the Project Area currently producing from the Jenkins San Andres Pool:

- a. **Sodbuster 21 Fee #4H** (API 30-025-43704) horizontally drilled from a surface hole location at 200 FSL, 1650 FWL in Section 21 to a bottom hole location at 335 FNL, 1630 FWL in Section 21;

- b. **Rag Mama 30-19 Fee #1H** (API 30-025-44067) horizontally drilled from a surface hole location at 25 FSL, 528 FEL in Section 30 to a bottom hole location at 2303 FSL, 394 FEL in Section 19; and
 - c. **Vince BGH No. 1H** (API No. 30-025-37104) (“Vince”) vertically drilled at 1980 FSL, 1750 FEL (Unit J) of Section 30.
5. The wells were initially drilled as producers within the San Andres formation.
6. The perforated interval of the Rag Mama 30-19 Fee #1 is 5,250’ to 12,123’; the perforated interval of the Sodbuster 21 Fee #4H is 5,150’ to 9,330’; and the perforated interval of the Vince BGH No. 1H is 4840’ to 4850’.
7. The Vince well currently produces 2 BOPD and 31 BWPD and is deemed uneconomic. Therefore, Manzano proposes to convert the well from a producer into an injection well to provide pressure maintenance support for the Rag Mama 30 19 Fee #1 well. Converting the well from a producer to an injector will also attempt to eliminate flaring.
8. Manzano plans to inject produced gas from the Sodbuster 21 Fee #4 and Rag Mama 30-19 Fee #1 into the San Andres formation through a closed system using the Vince BGH No. 1H at depths of 4840’ to 4850’ within the San Andres formation.
9. Accordingly, Manzano proposes the unitized interval be defined as the Jenkins San Andres pool (Pool Code 33950) within the San Andres formation at depths of 4840’ to 4850’ as defined on the Manzano Vince BGH #1 well log provided on page 24 of Form C-108.
10. **Exhibit A-2** includes a copy of Manzano’s Application for Authorization to Inject (“Form C-108”). I am generally familiar with the land matters addressed in the Form C-108.
11. Page 32 of Form C-108 contains a land map of the Project Area that identifies surface and mineral ownership interests entitled to notice within the area of review and includes applicable lease numbers. There are no other operators within a ½ mile area of review radius.

12. Page 12 of Form C-108 is an area of review map of the Project Area that depicts the producing wells and other wells within the ½ mile radius areas of review that penetrate the proposed injection zone. Pages 13-18 of Form C-108 provide detailed well information for the wells within the areas of review.

13. Manzano conducted a diligent, good-faith effort to identify the correct addresses of persons entitled to notice and has complied with the Division's notice requirements.

14. Notice of the Division's hearing was provided to all affected parties at least 20 days prior to the hearing date. A sample of the hearing notice letter and the associated return receipts are attached as **Exhibit A-3**.

15. Notice of the hearing was also published more than ten business days prior to the hearing date. The affidavit of publication is attached as **Exhibit A-4**.

16. The exhibits referenced above were either prepared by me or under my supervision or were compiled from company business records.

17. In my opinion, the granting of Manzano's application would serve the interests of conservation, the prevention of waste, and the protection of correlative rights.

18. I understand this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 17 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.


Nick C. McClelland

11/19/21
Date

**STATE OF NEW MEXICO
DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES
OIL CONSERVATION DIVISION**

**APPLICATION OF MANZANO LLC
FOR APPROVAL OF A PRESSURE
MAINTENANCE PROJECT AND
AUTHORIZATION TO INJECT,
LEA COUNTY, NEW MEXICO.**

CASE NO. 22357

**SELF-AFFIRMED STATEMENT
OF JOHN WORRALL**

1. I am employed by Manzano LLC (“Manzano”) as a geologist and am over 18 years of age and competent to provide this Self-Affirmed Statement. I have personal knowledge of the matters addressed herein. I am familiar with the Application in this case and with the geology matters pertaining to this Application. I have previously testified before the New Mexico Oil Conservation Division (“Division”), and my credentials as an expert in petroleum geology matters were accepted and made a matter of record.

2. Manzano’s Application seeks an order: (1) approving a pressure maintenance project for the injection of produced gas through the Vince BGH #1 well into the Jenkins San Andres pool (Pool Code 33950) within the San Andres formation in a project area (“Project Area”) comprised of SE/4 of Section 30, Township 9 South, Range 35 East, NMPM, Eddy County, New Mexico; and (2) authorizing Manzano to convert the Vince BGH #1 well from a producing well to an injector.

3. Manzano operates the following described wells within or near the Project Area currently producing from the Jenkins San Andres Pool:

- a. **Sodbuster 21 Fee #4H** (API 30-025-43704) horizontally drilled from a surface hole location at 200 FSL, 1650 FWL in Section 21 to a bottom hole location at 330 FNL, 1650 FWL in Section 21;
- b. **Rag Mama 30-19 Fee #1** (API 30-025-44067) horizontally drilled from a surface hole location at 25 FSL, 528 FEL in Section 30 to a bottom hole location at 2303 FSL, 394 FEL in Section 19; and
- c. **Vince BGH No. 1H** (API No. 30-025-37104) (“Vince”) vertically drilled at 1980 FSL, 1750 FEL (Unit J) of Section 30.

4. The perforated interval of the Rag Mama 30-19 Fee #1 is from 5,250’ to 12,123’; the perforated interval of the Sodbuster 21 Fee #4H is from 5150 to 9,330; and the perforated interval of the Vince BGH No. 1H is 4840’ to 4850’.

5. The Vince well currently produces 2 BOPD and 31 BWPD and is deemed uneconomic. Therefore, Manzano proposes to convert the well from a producer into an injection well to provide pressure maintenance support for the Rag Mama 30 19 Fee #1 well. Conversion of the well will also allow Manzano to attempt to eliminate flaring.

6. Manzano plans to inject produced gas from the Sodbuster 21 Fee #4 and Rag Mama 30-19 Fee #1 into the San Andres formation through a closed system using the Vince BGH No. 1H at depths of 4840’ to 4850’ within the San Andres formation.

7. Accordingly, Manzano proposes the unitized interval be defined as the Jenkins San Andres pool (Pool Code 33950) within the San Andres formation at depths of 4840’ to 4850’ as defined on the Manzano Vince BGH #1 well log provided on page 24 of Form C-108.

8. The injection interval of the Vince BGH No. 1H well (“Vince”) is 4840’ to 4850’.

9. The productive zone immediately overlying the proposed injection interval is the San Andres formation with its top being at an approximate depth of 4000' TVD.

10. Page 22 of Form C-108 contains a structure map of the Project Area. The map shows the structural contours near the top of the P-1 dolomite within the San Andres formation. The map demonstrates the reservoir is relatively flat with a 40 feet of east dip per mile (a half degree slope).

11. Page 23 of Form C-108 contains an isopach map of the P-1 Dolomite interval within the San Andres formation. The San Andres formation is present from 4000 to 5460' within the Vince well. The interval from 4810 to 4900' is known as the P-1 dolomite which is a fine crystalline dolomite with 4% to 12% porosity and 20 to 100 ohm-m of resistivity. The interval has up to 100' of porosity greater than 6%. Oil and gas is stratigraphically trapped where this reservoir pinches out northward into anhydrite. The zone is also overlain by anhydrite and underlain by a tight limestone.

12. Page 21 of Form C-108 contains a cross-section of the target injection interval. The cross-sections demonstrate the injection interval is consistent and continuous across the formation underlying the Project Area. The cross-section also shows all lands within the proposed unit contain porous reservoir rock, and therefore, all lands within the proposed unit appear capable of contributing additional secondary recovery reserves.

13. From geologic studies performed over this area, the Project Area is well suited for pressure maintenance operations and the entire Project Area should continue to contribute enhanced recovery reserves.

14. There are no faults or other geologic impediments that would impede the efficiency of the Project.

15. Manzano's pressure maintenance project can be conducted in a safe and responsible manner without causing waste, impairing correlative rights or endangering fresh water, public health or the environment.

16. There are no water wells within one (1) mile of the proposed injection well. Page 26 of Form C-108 shows the nearest water wells are located 2.5 to 3.0 miles from the Vince well.

17. The water aquifer in the Project Area is the Ogalalla Red Beds. Page 25 of Form C-108 contains a map from Atkins Engineering of Roswell indicating the top of water is present at 4025' above sea level below the Vince well. This well has a drill floor elevation of 4183' where water is found at 158'. The map indicates there is approximately 25' of water in this area.

18. With respect to compatibility, the source of the gas to be injected will be produced gas from the **Sodbuster 21 Fee #4H** and **Rag Mama 30-19 Fee #1** wells drilled within or near the Project area. Gas analyses for the Sodbuster 21 Fee #4 and Rag Mama 30-19 Fee #1 are provided on pages 19 and 20 of Form C-108 and show the two source wells produce a typical San Andres formation gas – the BTU content is 1059 to 1138 with nitrogen (4.4 to 8.1 Mole %), CO₂ (13.1 to 15.3 mole%) and H₂S (2.1 to 2.4 mole %).

19. I do not expect any compatibility issues to arise from the proposed injection operations.

20. I have examined the available geological and engineering data and have found no evidence of open faults or hydrological connection between the proposed injection interval and any underground sources of drinking water.

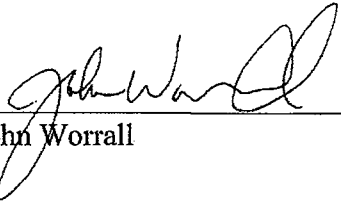
21. Based on my professional training and experience, it is my opinion that the proposed injection operations will not impair any hydrocarbon-bearing zones. It is also my opinion

that injection fluids will be confined to the injection interval as a result of the stratigraphic confining layers above and below the injection zone.

22. In my opinion, the granting of Manzano's application would serve the interests of conservation, the prevention of waste, and the protection of correlative rights.

23. The exhibits referenced above were either prepared by me or under my supervision or were compiled from company business records.

24. I understand this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 23 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.



John Worrall

11-22-2021
Date



HINKLE SHANOR LLP
 ATTORNEYS AT LAW
 PO BOX 2068
 SANTA FE, NEW MEXICO 87504
 505-982-4554 (FAX) 505-982-8623

WRITER:
 Dana S. Hardy, Partner
 dhardy@hinklelawfirm.com

November 5, 2021

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO ALL INTERESTED PARTIES SUBJECT TO NOTICE

Re: Case No. 22357 - Application of Manzano LLC for Approval of a Pressure Maintenance Project and Authorization to Inject, Lea County, New Mexico.

To whom it may concern:

This letter is to advise you that the enclosed application was filed with the New Mexico Oil Conservation Division. The hearing will be conducted on **December 2, 2021** beginning at 8:15 a.m.

During the COVID-19 Public Health Emergency, state buildings are closed to the public and hearings will be conducted remotely. To participate in the electronic hearing, see the instructions posted on the OCD Hearings website: <https://www.emnrd.nm.gov/ocd/hearing-info/>. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Pursuant to Division Rule 19.15.4.13.B, a party who intends to present evidence at the hearing shall file a pre-hearing statement and serve copies on other parties, or the attorneys of parties who are represented by counsel, at least four business days in advance of a scheduled hearing, but in no event later than 5:00 p.m. mountain time, on the Thursday preceding the scheduled hearing date. The statement must be filed at the Division's Santa Fe office or submitted through the OCD E-Permitting system (<https://wwwapps.emnrd.state.nm.us/ocd/ocdpermitting/>) and should include: the names of the parties and their attorneys, a concise statement of the case, the names of all witnesses the party will call to testify at the hearing, the approximate time the party will need to present its case, and identification of any procedural matters that are to be resolved prior to the hearing.

Please do not hesitate to contact me if you have any questions about this matter.

Sincerely,

/s/ Dana S. Hardy

Dana S. Hardy

Enclosure

MANZANO LLC
Case No. 22357
Exhibit A-3

PO BOX 10
 ROSWELL, NEW MEXICO 88202
 575-622-6510
 (FAX) 575-623-9332

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

7601 JEFFERSON ST NE • SUITE 180
 ALBUQUERQUE, NEW MEXICO 87109
 505-858-8320
 (FAX) 505-858-8321

PS Form 3811, July 2015 PSN 7530-02-000-9053

2. Article Number (Transfer from service label) 7020 2450 0002 1364 8394

9590 9402 5760 0003 2656 40

1. Article Addressed to:
Maxine E. Barber and Tom Barber
223 N. Pine Grove Street
Wichita, KS 67212-5168

3. Service Type
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Return Receipt for Merchandise
 Return Receipt for Delivery
 Collect on Delivery Restricted Delivery
 Collect on Delivery
 Insured Mail
 Insured Mail Restricted Delivery (over \$500)

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

B. Received by (Printed Name) T. BARBER
 C. Date of Delivery 7/8

A. Signature CU 19
 Agent
 Addressee

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Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/>	Return Receipt (hardcopy)	\$
<input type="checkbox"/>	Return Receipt (electronic)	\$
<input type="checkbox"/>	Certified Mail Restricted Delivery	\$
<input type="checkbox"/>	Adult Signature Required	\$
<input type="checkbox"/>	Adult Signature Restricted Delivery	\$

Postage and Fees

Total Postage and Fees

Sent To
Maxine E. Barber and Tom Barber
223 N. Pine Grove Street
Wichita, KS 67212-5168
City, State, ZIP

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7020 2450 0002 1364 8394



7020 2450 0002 1364 8585

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Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To
John H. Breedlove, Jr.
1407 W. Cuthbert Ave.
Midland, TX 79701

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

John H. Breedlove, Jr.
1407 W. Cuthbert Ave.
Midland, TX 79701



9590 9402 5760 0003 2654 80

2. Article Number (Transfer from service label)

7020 2450 0002 1364 8585

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

X *[Signature]*

B. Received by (Printed Name) *[Signature]* C. Date of Delivery

D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

Domestic Return Receipt

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street and Daniel Energy, Inc.
5932 Henslee Ct.

City, State, Granbury, TX 76049

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7020 2450 0002 1364 8578



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature X <i>Lineberger</i> <i>RL</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>RT35 C19</i> C. Date of Delivery <i>11-12-21</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Daniel Energy, Inc. 5932 Henslee Ct. Granbury, TX 76049</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7020 2450 0002 1364 8578</p>	



9590 9402 5760 0003 2654 97

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Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____


Sent To
Dolores Davis, SSP
P.O. Box 239
Monument, NM 88265

City, State _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions.



7020 2450 0002 1364 8158

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ 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. 	<p>A. Signature <i>Dolores Davis</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p>
<p>1. Recipient Name and Address</p> <p>Dolores Davis, SSP P.O. Box 239 Monument, NM 88265</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p style="text-align: center;">  9590 9402 5760 0003 2672 00 </p> <p>2. Article Number (Transfer from service label)</p> <p>0 2450 0002 1364 8158</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

7020 2450 0002 1364 8516

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street and A Devon Energy Production Co., LP
Attn: Land Department
333 W. Sheridan Avenue
City, State, Zip Oklahoma City, OK 73102

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Devon Energy Production Co., LP
Attn: Land Department
333 W. Sheridan Avenue
Oklahoma City, OK 73102

9590 9402 5760 0003 2657 25

2. Article Number (Transfer from service label)
7020 2450 0002 1364 8516

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

X *S Alford*

B. Received by (Printed Name) *SA P-19*

C. Date of Delivery

D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation™

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)



CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street and A Scott Alan Frost, SSP
22428 Holsey Acres Road
Indiahoma, OK 73552

City, State, & Zip _____

PS Form 3800, April 2015 RSN 7530-02-000-9047 See Reverse for Instructions

Postmark Here
NOV 05 2021
SANTA FE, NM 87501
SPS

7020 2450 0002 1364 8271

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Scott Alan Frost, SSP
22428 Holsey Acres Road
Indiahoma, OK 73552

2. Article Number (Transfer from service label)

9590 9402 5760 0003 2673 23

20 2450 0002 1364 8271

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
* Maria Frost Agent
 Addressee

B. Received by (Printed Name) MARIA FROST

C. Date of Delivery 11-8-21

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation™

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Insured Mail Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

U.S. POSTAL SERVICE
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To Arville O. Glenn, Jr., SSP
 Street and A 27 Daggett Rim Road
 Boise, ID 83716
 City, State, & Z _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Stamp: SANTA, FE, NM 87501 NOV 05 2021

7020 2450 0002 1364 8400

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature <i>[Signature]</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Brenda Glenn</i> C. Date of Delivery <i>12/01/2021</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below: _____</p>
<p>1. Article Addressed to:</p> <p>Arville O. Glenn, Jr., SSP 27 Daggett Rim Road Boise, ID 83716</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>9590 9402 5760 0003 2656 57</p> <p>7020 2450 0002 1364 8400</p>	<p><i>Stamp: BOISE ID 83705</i></p>

7020 2450 0002 1364 8172

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Clark A. Glenn, SSP
P.O. Box 692
Tatum, NM 88267

City, State, Zip

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery 11/8/21</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below: _____</p>
<p>1. Article Addressed to:</p> <p>Clark A. Glenn, SSP P.O. Box 692 Tatum, NM 88267</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>120 2450 0002 1364 8172</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

7020 2450 0002 1364 8264

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To
 Street and City, State, ZIP+4®
 Cliff Glenn
 7290 North Main
 Roswell, NM 88201

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature <i>[Signature]</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>[Name]</i> C. Date of Delivery <i>[Date]</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below: _____</p>
<p>1. Article Addressed to:</p> <p>Cliff Glenn 7290 North Main Roswell, NM 88201</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>9590 9402 5760 0003 2673 16</p> <p>7020 2450 0002 1364 8264</p>	



7020 2450 0002 1364 8165



FROM **HINKLE SHANOR LLP**
 ATTORNEYS AT LAW
 PO BOX 2068 • 218 MONTEZUMA
 SANTA FE, NEW MEXICO 87504

TO

Don Glenn, SSP
 170 Kensington Drive
 Fort Collins, CO 80525

WTF

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT

Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Don Glenn, SSP
 Street or 170 Kensington Drive
 City, State, Zip+4 Fort Collins, CO 80525

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



NIXIE 806 72 1 7211/15/21

RETURN TO SENDER
 NOT DELIVERABLE AS ADDRESSED
 UNABLE TO FORWARD

BC: 87304206868 0159N319002-01405

7020 2450 0002 1364 8219

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street and Apt. Marilyn K. Glenn, SSP
6865 Bennell Drive
Reynoldsburg, OH 43068

City, State, Zip

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Marilyn K. Glenn, SSP 6865 Bennell Drive Reynoldsburg, OH 43068</p> <p>9590 9402 5760 0003 2672 62</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p>red Mail (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7020 2450 0002 1364 8219</p>	

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7020 2450 0002 1364 8110

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL SANTA FE, NM NOV 05 2021 USPS

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To
Melissa Glenn, SSP
1620 South Ong, Apt. C
Amarillo, TX 79102
City, State, _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature X <i>Russell Coleman</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>RUSSELL COLEMAN</i></p> <p>C. Date of Delivery <i>NOV 22 2021</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Melissa Glenn, SSP 1620 South Ong, Apt. C Amarillo, TX 79102</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Mail <input type="checkbox"/> Mail Restricted Delivery (500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7020 2450 0002 1364 8110</p>	

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

Post Office Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fees as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street and Ap. Rex Glenn, SSP
 1300 Blue Mountain Road
 Roswell, NM 88201

City, State, Zi Roswell, NM 88201

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Postmark Here
 SANTA FE, NM 87501
 NOV 05 2021

7020 2450 0002 1364 8196

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature <i>x Sherry Glenn</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Sherry Glenn</i> C. Date of Delivery <i>11/9/21</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Rex Glenn, SSP 1300 Blue Mountain Road Roswell, NM 88201</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>9590 9402 5760 0003 2672 48</p> <p>7020 2450 0002 1364 8196</p>	

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7020 2450 0002 1364 8332

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To
Street and Apt. William E. Glenn, Jr., SSP
1001 West Alameda
Roswell, NM 88201

City, State, ZIP _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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.

William E. Glenn, Jr., SSP
1001 West Alameda
Roswell, NM 88201



9590 9402 5760 0003 2655 89

2. Article Number (Transfer from service label)

7020 2450 0002 1364 8332

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X A-P. C13 C19 Agent
 Addressee

B. Received by (Printed Name) W. Glenn C. Date of Delivery 11/05/21

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation™

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Mail Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7020 2450 0002 1364 8134

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fees as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Michael Goolsby, MSU
603 Pine
Dimmitt, TX 79027

City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. <p>1. Article Addressed to:</p> <p>Michael Goolsby, MSU 603 Pine Dimmitt, TX 79027</p> <p>2. Article Number (Transfer from service label)</p> <p>7020 2450 0002 1364 8134</p>	<p>A. Signature</p> <p><i>Michael Goolsby</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p><i>Michael Goolsby</i></p> <p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery (\$500)</p>



7020 2450 0002 1364 8295

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fees as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street and Ap Laura Hand, MSU
P.O. Box 717
Spearman, TX 79081

City, State, Zi _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Laura Hand, MSU
P.O. Box 717
Spearman, TX 79081

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Doyle W. Hand* Agent Addressee

B. Received by (Printed Name) C. Date of Delivery
Doyle W. Hand *11/9/2021*

D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:



9590 9402 5760 0003 2673 47

2. Article Number (Transfer from service label)
7020 2450 0002 1364 8295

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation™

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Insured Mail Insured Mail Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7020 2450 0002 1364 8202



U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

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

OFFICIAL
 SANTA FE, NM 87501


NOV 05 2021
 Postmark Here

USPS

U.S. Postal Service	2020 4942 2000 0542 0202
Certified Mail Fee	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	
<input type="checkbox"/> Return Receipt (electronic)	
<input type="checkbox"/> Certified Mail Restricted Delivery	
<input type="checkbox"/> Adult Signature Required	
<input type="checkbox"/> Adult Signature Restricted Delivery	
Postage	
Total Postage and Fees	
Sent To	Brenda Sue Ehlert Hayden, SSP 100 10 th Avenue, #6 San Francisco, CA 94121
City, State, Z	

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

FROM

 **HINKLE SHANOR LLP**
 ATTORNEYS AT LAW
 PO BOX 2068 • 218 MONTEZUMA
 SANTA FE, NEW MEXICO 87504

TO

Brenda Sue Ehlert Hayden, SSP
 100 10th Avenue, #6
 San Francisco, CA 94121

MSN

UNITED STATES POSTAL SERVICE
 02 1P
 0000913767
 MAILED FROM MZ

-R-T-S- 941215115-1N 11/13/21
 RETURN TO SENDER
 NO SUCH NUMBER

7020 2450 0002 1364 8349

CERTIFIED MAIL® RECEIPT
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OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

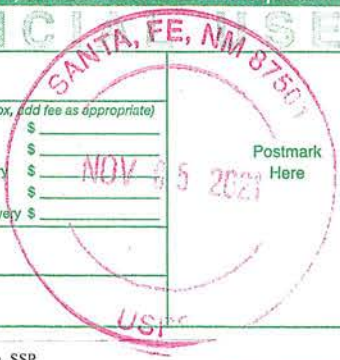
Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street and Apt Patricia Horton, SSP
1001 West Alameda
City, State, Zip Roswell, NM 88201

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature X <u>A.P. CIB C19</u> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>P. Horton</u> C. Date of Delivery <u>11/9/21</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Patricia Horton, SSP 1001 West Alameda Roswell, NM 88201</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted</p> <p><input checked="" type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Mail</p> <p><input type="checkbox"/> Mail Restricted Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>9590 9402 5760 0003 2655 96</p> <p>7020 2450 0002 1364 8349</p>	<p><input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7020 2450 0002 1364 8288

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OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, and fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street and: Glenda King, MSU
49 East Canyonview Drive
Ransom Canyon, TX 79366

City, State: _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Glenda King, MSU
49 East Canyonview Drive
Ransom Canyon, TX 79366



2. Article Number (Transfer from service label)
7020 2450 0002 1364 8288

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Handwritten Signature]* Agent Addressee

B. Received by (Printed Name) *Henry King*

C. Date of Delivery *11-7-2021*

D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt




2450 0002 1364 8226

Handwritten initials "W" and "11.8" in blue ink.

Red stamp: "FIRST NOTICE AND NOTICE TO RETURN".

Large handwritten signature in blue ink, circled in red.

FROM



HINKLE SHANOR LLP
ATTORNEYS AT LAW
PO BOX 2068 · 218 MONTEZUMA
SANTA FE, NEW MEXICO 87504

TO

Toni Martin
528 Vista Grande
Newport Beach, CA 92660

-R-T-S- 92660-RFS-1N 11/13/21

RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD
RETURN TO SENDER



9228 49ET 2000 0542 0202

UNITED STATES POSTAL SERVICE
FITZNEY BOWER
\$ 009.16
02 1P 000913767 NOV 05 2021
MAILED FROM ZIP CODE 87504

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

NOV 05 2021
Postmark Here

USPS

Postage

Total Postage and Fees

Sent To
Toni Martin
528 Vista Grande
Newport Beach, CA 92660
City, State



AA

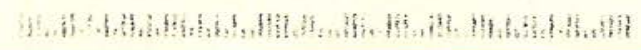
FROM **HINKLE SHANOR LLP**
 ATTORNEYS AT LAW
 PO BOX 2068 · 218 MONTEZUMA
 SANTA FE, NEW MEXICO 87504

TO

Amanda McCasland
 016 Lafayette Drive NE
 Albuquerque, NM 87107

-R-T-S- 871075235-1N 11/15/21

RETURN TO SENDER
INSUFFICIENT ADDRESS
UNABLE TO FORWARD
RETURN TO SENDER



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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy)

Return Receipt (electronic)

Certified Mail Restricted Delivery

Adult Signature Required

Adult Signature Restricted Delivery

Postage \$

Total Postage and Fees \$

Sent To Amanda McCasland
 Street and 016 Lafayette Drive NE
 City, State, Albuquerque, NM 87107

Postmark Here
 NOV 05 2021

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7020 2450 0002 1364 8370

7020 2450 0002 1364 8318

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OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street and: Gary McCray, MSU
9375 Swain Road
San Angelo, TX 76905

City, State, _____

PS Form 3800, April 2015 PSN 7530-02-000-9047. See Reverse for Instructions.



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature</p> <p>X <i>Gary McCray</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>GARY McCRAY</i> C. Date of Delivery <i>11-10-21</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Gary McCray, MSU 9375 Swain Road San Angelo, TX 76905</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>9590 9402 5760 0003 2655 65</p> <p>0 2450 0002 1364 8318</p>	<p>Domestic Return Receipt</p>

7020 2450 0002 1364 8325

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Domestic Mail Only

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OFFICIAL USE
SANTA FE, NM 87501

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To
Janelle McCray, MSU
1441 FM 651
Crosbyton, TX 79322

City, State, _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Postmark Here
NOV 05 2021
USPS

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p>
<p>1. Article Addressed to:</p> <p>Janelle McCray, MSU 1441 FM 651 706 N. Ridgewood Rd. Crosbyton, TX 79322 Wlysses, KS 67880</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>2. Article Number (Transfer from service label) 7020 2450 0002 1364 8325</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>

7020 2450 0002 1364 8462

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add fees appropriate)
 Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$


Postage \$
Total Postage and Fees \$

Sent To Sherry McCray, Trustee
 Street and Address McCray Family Trust
 9919 Edgecove
 City, State, ZIP+4 Dallas, TX 75238

Postmark Here
 SANTA, FE, NM 87501
 NOV 05 2021

USPS

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee X C-19</p> <p>B. Received by (Printed Name) McCray</p> <p>C. Date of Delivery 11/8/21</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Sherry McCray, Trustee McCray Family Trust 9919 Edgecove Dallas, TX 75238</p> <p> 9590 9402 5760 0003 2657 18</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Signature Confirmation Restricted Delivery (over \$500) <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label) 7020 2450 0002 1364 8462</p>	
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To
Leo Patrick Morgan, Jr.
1009 Clinton Street
Carrollton, TX 75007

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Stamp: SANTA FE, NM 87501 NOV 05 2021 USPS

7020 2450 0002 1364 9919

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature <input checked="" type="checkbox"/> L. Morgan <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) Leo Patrick Morgan, Jr.</p> <p>C. Date of Delivery 11-9-21</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Leo Patrick Morgan, Jr. 1009 Clinton Street Carrollton, TX 75007</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7020 2450 0002 1364 9919</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Registered Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>



7020 2450 0002 1364 9926

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fees as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street and A. Mary Carol Morgan
4417 Mockingbird Lane
Dallas, TX 75205

City, State, & ZIP+4® _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Mary Carol Morgan
4417 Mockingbird Lane
Dallas, TX 75205



9590 9402 5760 0003 2670 40

2. Article Number (Transfer from service label)

7020 2450 0002 1364 9926

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
Mary Carol Morgan

B. Received by (Printed Name) Agent Addressee
Mary Carol Morgan

C. Date of Delivery
11/9/21

D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Mail Restricted Delivery (00)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7020 2450 0002 1364 8479

Official Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

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

OFFICIAL SERVICE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To Gretchen Nearburg
 Street or PO Box 1129 Challenger
 City, State Lakeway, TX 78734

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below: _____</p>
<p>1. Article Addressed to:</p> <p>Gretchen Nearburg 1129 Challenger Lakeway, TX 78734</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input checked="" type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7020 2450 0002 1364 8479</p>	<p>Domestic Return Receipt</p>



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OFFICIAL USE

Certified Mail Fee
 \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage
 \$ _____

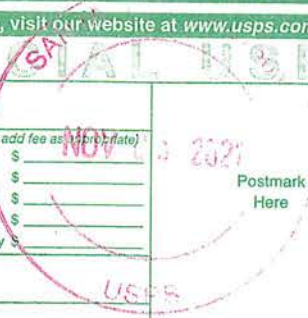
Total Postage and Fees
 \$ _____

Sent To
 Keith Z. Neuner
 170 Camino Rayo Del Sol
 Corrales, NM 87048-6805

City, State, _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

9866 4964 2000 0542 0202



7020 2450 0002 1364 9988

NOV 13 2021

12/01/16/21

FEI SENDER
 RETURN TO SENDER
 851 FEI SENDER
 RETURN TO SENDER
 158

2104320073-0011

NOT DELIVERABLE
 2104320073-0011

NOV 13 2021

TO
 AWK

FROM
 HINKLE SHANOR LLP
 ATTORNEYS AT LAW
 PO BOX 2068 • 218 MONTEZUMA
 SANTA FE, NEW MEXICO 87504

Keith Z. Neuner
 170 Camino Rayo Del Sol
 Corrales, NM 87048-6805

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ 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:
 Keith Z. Neuner
 170 Camino Rayo Del Sol
 Corrales, NM 87048-6805

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 CV-19 Agent
 Addressee

B. Received by (Printed Name)
 O-65

C. Date of Delivery
 11-6-2021

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

Mail box

3. Service Type
 Adult Signature Priority Mail Express®
 Adult Signature Restricted Delivery Registered Mail™
 Certified Mail® Registered Mail Restricted Delivery
 Certified Mail Restricted Delivery

9590 9402 5760 0003 2671 01



7020 2450 0002 1364 9971

BC: 8750420688 2265N316Z03-00433
NIXIE 731 PZ 1
RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD
0011/12/21



FROM **HINKLE SHANOR LLP**
ATTORNEYS AT LAW
PO BOX 2068 · 218 MONTEZUMA
SANTA FE, NEW MEXICO 87504

TO
Walta Neuner Ocker
2803 FM 763
Corpus Christi, TX 78415

WTF

U.S. Postal ServiceSM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

OFFICIAL MAIL

NOV 15 2021

Postmark Here

USPS

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage and Fees \$

Sent To: Walta Neuner Ocker
 Street and: 2803 FM 763
 City, State: Corpus Christi, TX 78415

PS Form 3800, April 2015 PSN 753902-000-9047 See Reverse for Instructions

7266 496T 2000 0542 0202

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street Read & Stevens, Inc.
Attn: Land Department
P.O. Box 1518

City, St. Roswell, NM 88202

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7020 2450 0002 1364 8486



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
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7211/16/21

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FROM



HINKLE SHANOR LLP

ATTORNEYS AT LAW

PO BOX 2068 • 218 MONTEZUMA
SANTA FE, NEW MEXICO 87504

TO

Ardis E. Schleiger
6600 Lakota Court
Loveland, CO 80534



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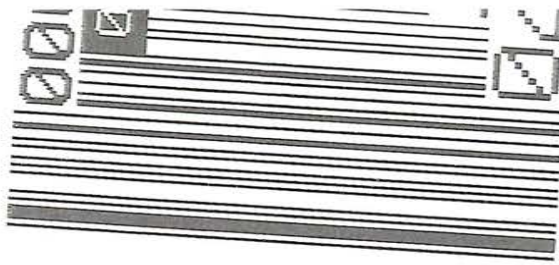
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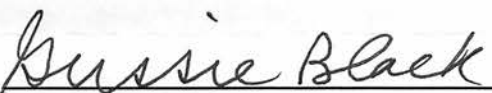
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Beginning with the issue dated
November 14, 2021
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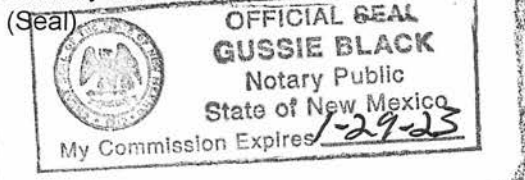
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LEGAL NOTICE November 14, 2021

This is to notify all interested parties, including Donovan D. Crockett; Hayden G. Crockett; William Harrel Delafield, Jr.; Mary Ann Delafield Frazier; Gleason Wildcats, LLC; Donald Joseph Marczeski; Dorothy Ann Middaugh; Margaret Ann Morgan Lilly, Edward R. Lilly; Patricia Ann Morgan McNally; Leo Patrick Morgan, Jr.; Mary Carol Morgan; Sharon Y. Weisler; Crayton Weisler; William Marvin Zahn, Jr.; Stephanie Zahn; Darwin D. Crockett; Dorothy Fitzgerald; Walta Neuner Ocker; Keith Z. Neuner; Robert Franklin White, Sr.; Rebecca Ann Gallun, Trustee of the Rebecca Ann Gallun Exempt Trust; Everett Bruce Lomax, Trustee of the Everett Bruce Lomax Exempt Trust; Kay Lomax Jerin, Trustee of the Kay Lomax Jerin Exempt Trust; Kathryn Ann Barwick Fox; Maxine E. Barber; Tom Barber; Rozella M. Jones; Arville O. Glenn, Jr.; Arlis E. Schleiger; Worth Fullingim; Rena F. Kerr; Rodean Gleason; Beal Gleason; Cleo Dickinson; James Don Dickinson; Barbara S. Dickinson; Grace G. Glenn; Prosperity State Bank, Successor to American State Bank, Trustee of the Willa Ruth Simmons Trust; Kenneth Edward Bennett and Frieda Johanna Bennett, Successors Trustees of the Bennett Family Living Trust; Lawrence A. Wangler, Trustee of the Wangler Trust; Sherry McCray, Trustee, McCray Family Trust; Oliver Falls; Melissa Glenn; Gerald Glenn; Bonnie Downing; Michael Goolsby; Cindy Corkins; Phillip Corkins; Melanie Caywood; Patsy Jean Howard Guinn; Doug Guinn; Dolores Davis; Don Glenn; Clark A. Glenn; Carolyn Taylor; Rex Glenn; Brenda Sue Ehlert Hayden; Marilyn K. Glenn; Toni Martin; Laura Oglesby; Claudia Moyers; Jennifer Glenn; Cliff Glenn; Scott Alan Frost; Glenda King; Laura Hand; Alice Reed; Gary McCray; Janelle McCray; William E. Glenn, Jr.; Patricia Horton; Lance Jackson; Tiffany Latner; Amanda McCasland; Amelia Jackson; Kathryn Ann Barwick Fox; Alvin Simpson; Christine Simpson; Worth Fullingim; Lawrence A. Wangler, Trustee of the Wangler Trust; Cindy Corkins; Phillip Corkins; and their successors and assigns that the New Mexico Oil Conservation Division will conduct a hearing on an application submitted by Manzano LLC (Case No. 22357). During the COVID-19 Public Health Emergency, state buildings are closed to the public and hearings will be conducted remotely. The hearing will be conducted on December 2, 2021 beginning at 8:15 a.m. To participate in the electronic hearing, see the instructions posted on the docket for that date: <https://www.emnrd.nm.gov/ocd/hearing-info/>. Applicant seeks an order: (1) approving a pressure maintenance project for the injection of produced gas through the Vince BGH #1 well into the San Andres formation in a project area ("Project Area") comprised of SE/4 of Section 30, Township 9 South, Range 35 East, NMPM, Eddy County, New Mexico; and (2) authorizing Manzano to convert the Vince BGH #1 well from a producing well to an injector. Applicant operates the following described wells within or near the Project Area:

- the Sodbuster 21 Fee #4H (API 30-025-43704) with a surface hole location at 200 FSL, 1650 FWL of Section 21 and a bottom hole location at 330 FNL, 1650 FWL of Section 21;
- the Rag Mama 30-19 Fee #1 (API 30-025-44067) with a surface hole location at 25 FSL, 528 FEL of Section 30 and a bottom hole location at 2303 FSL, 394 FEL of Section 19; and
- The Vince BGH No. 1H (API No. 30-025-37104) located at 1980 FSL, 1750 FEL (Unit J) of Section 30.

The wells are currently producing from the Jenkins San Andres Pool (Pool No. 33950). Applicant proposes to convert its Vince BGH No. 1H well from a producer into an injection well for pressure maintenance operations. Applicant plans to inject produced gas from the Sodbuster 21 Fee #4 and Rag Mama 30-19 Fee #1 into the San Andres formation through a closed system using the Vince BGH No. 1H. Applicant does not anticipate compatibility issues. The injection interval of the Vince BGH No. 1H is 4840 feet to 4850 feet. Injection will provide pressure maintenance support for the Rag Mama 30 19 Fee #1 well and will also reduce flaring. The expected average injection rate of produced gas into the Vince BGH No. 1H is 150 MCFGPD. The expected maximum injection rate is 1,000 MCFGPD to provide Manzano the option to inject more gas as the GOR increases or if Manzano drills additional wells in the Jenkins San Andres Pool. The expected average injection pressure of produced gas into the Vince BGH No. 1H is 500 psi and the proposed maximum injection pressure is 950 psi. Applicant's proposed pressure maintenance project can be conducted in a safe and responsible manner without causing waste, impairing correlative rights or endangering fresh water, public health or the environment. The wells are located approximately 3 miles west of Crossroads, New Mexico.
#37024

02107475

00260649

GILBERT
HINKLE, SHANOR LLP
PO BOX 2068
SANTA FE, NM 87504

MANZANO LLC
Case No. 22357
Exhibit A-4

**STATE OF NEW MEXICO
DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES
OIL CONSERVATION DIVISION**

**APPLICATION OF MANZANO LLC
FOR APPROVAL OF A PRESSURE
MAINTENANCE PROJECT AND
AUTHORIZATION TO INJECT,
LEA COUNTY, NEW MEXICO.**

CASE NO. 22357

**SELF-AFFIRMED STATEMENT
OF JOHN WORRALL**

1. I am employed by Manzano LLC (“Manzano”) as a geologist and am over 18 years of age and competent to provide this Self-Affirmed Statement. I have personal knowledge of the matters addressed herein. I am familiar with the Application in this case and with the geology matters pertaining to this Application. I have previously testified before the New Mexico Oil Conservation Division (“Division”), and my credentials as an expert in petroleum geology matters were accepted and made a matter of record.

2. Manzano’s Application seeks an order: (1) approving a pressure maintenance project for the injection of produced gas through the Vince BGH #1 well into the Jenkins San Andres pool (Pool Code 33950) within the San Andres formation in a project area (“Project Area”) comprised of SE/4 of Section 30, Township 9 South, Range 35 East, NMPM, Eddy County, New Mexico; and (2) authorizing Manzano to convert the Vince BGH #1 well from a producing well to an injector.

3. Manzano operates the following described wells within or near the Project Area currently producing from the Jenkins San Andres Pool:

**MANZANO LLC
Case No. 22357
Exhibit B**

- a. **Sodbuster 21 Fee #4H** (API 30-025-43704) horizontally drilled from a surface hole location at 200 FSL, 1650 FWL in Section 21 to a bottom hole location at 330 FNL, 1650 FWL in Section 21;
- b. **Rag Mama 30-19 Fee #1** (API 30-025-44067) horizontally drilled from a surface hole location at 25 FSL, 528 FEL in Section 30 to a bottom hole location at 2303 FSL, 394 FEL in Section 19; and
- c. **Vince BGH No. 1H** (API No. 30-025-37104) (“Vince”) vertically drilled at 1980 FSL, 1750 FEL (Unit J) of Section 30.

4. The perforated interval of the Rag Mama 30-19 Fee #1 is from 5,250’ to 12,123’; the perforated interval of the Sodbuster 21 Fee #4H is from 5150 to 9,330; and the perforated interval of the Vince BGH No. 1H is 4840’ to 4850’.

5. The Vince well currently produces 2 BOPD and 31 BWPD and is deemed uneconomic. Therefore, Manzano proposes to convert the well from a producer into an injection well to provide pressure maintenance support for the Rag Mama 30 19 Fee #1 well. Conversion of the well will also allow Manzano to attempt to eliminate flaring.

6. Manzano plans to inject produced gas from the Sodbuster 21 Fee #4 and Rag Mama 30-19 Fee #1 into the San Andres formation through a closed system using the Vince BGH No. 1H at depths of 4840’ to 4850’ within the San Andres formation.

7. Accordingly, Manzano proposes the unitized interval be defined as the Jenkins San Andres pool (Pool Code 33950) within the San Andres formation at depths of 4840’ to 4850’ as defined on the Manzano Vince BGH #1 well log provided on page 24 of Form C-108.

8. The injection interval of the Vince BGH No. 1H well (“Vince”) is 4840’ to 4850’.

9. The productive zone immediately overlying the proposed injection interval is the San Andres formation with its top being at an approximate depth of 4000' TVD.

10. Page 22 of Form C-108 contains a structure map of the Project Area. The map shows the structural contours near the top of the P-1 dolomite within the San Andres formation. The map demonstrates the reservoir is relatively flat with a 40 feet of east dip per mile (a half degree slope).

11. Page 23 of Form C-108 contains an isopach map of the P-1 Dolomite interval within the San Andres formation. The San Andres formation is present from 4000 to 5460' within the Vince well. The interval from 4810 to 4900' is known as the P-1 dolomite which is a fine crystalline dolomite with 4% to 12% porosity and 20 to 100 ohm-m of resistivity. The interval has up to 100' of porosity greater than 6%. Oil and gas is stratigraphically trapped where this reservoir pinches out northward into anhydrite. The zone is also overlain by anhydrite and underlain by a tight limestone.

12. Page 21 of Form C-108 contains a cross-section of the target injection interval. The cross-sections demonstrate the injection interval is consistent and continuous across the formation underlying the Project Area. The cross-section also shows all lands within the proposed unit contain porous reservoir rock, and therefore, all lands within the proposed unit appear capable of contributing additional secondary recovery reserves.

13. From geologic studies performed over this area, the Project Area is well suited for pressure maintenance operations and the entire Project Area should continue to contribute enhanced recovery reserves.

14. There are no faults or other geologic impediments that would impede the efficiency of the Project.

15. Manzano's pressure maintenance project can be conducted in a safe and responsible manner without causing waste, impairing correlative rights or endangering fresh water, public health or the environment.

16. There are no water wells within one (1) mile of the proposed injection well. Page 26 of Form C-108 shows the nearest water wells are located 2.5 to 3.0 miles from the Vince well.

17. The water aquifer in the Project Area is the Ogalalla Red Beds. Page 25 of Form C-108 contains a map from Atkins Engineering of Roswell indicating the top of water is present at 4025' above sea level below the Vince well. This well has a drill floor elevation of 4183' where water is found at 158'. The map indicates there is approximately 25' of water in this area.

18. With respect to compatibility, the source of the gas to be injected will be produced gas from the **Sodbuster 21 Fee #4H** and **Rag Mama 30-19 Fee #1** wells drilled within or near the Project area. Gas analyses for the Sodbuster 21 Fee #4 and Rag Mama 30-19 Fee #1 are provided on pages 19 and 20 of Form C-108 and show the two source wells produce a typical San Andres formation gas – the BTU content is 1059 to 1138 with nitrogen (4.4 to 8.1 Mole %), CO₂ (13.1 to 15.3 mole%) and H₂S (2.1 to 2.4 mole %).

19. I do not expect any compatibility issues to arise from the proposed injection operations.

20. I have examined the available geological and engineering data and have found no evidence of open faults or hydrological connection between the proposed injection interval and any underground sources of drinking water.

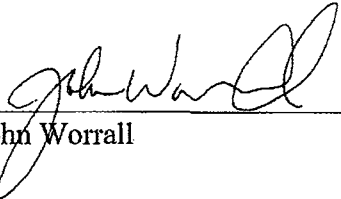
21. Based on my professional training and experience, it is my opinion that the proposed injection operations will not impair any hydrocarbon-bearing zones. It is also my opinion

that injection fluids will be confined to the injection interval as a result of the stratigraphic confining layers above and below the injection zone.

22. In my opinion, the granting of Manzano's application would serve the interests of conservation, the prevention of waste, and the protection of correlative rights.

23. The exhibits referenced above were either prepared by me or under my supervision or were compiled from company business records.

24. I understand this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 23 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.



John Worrall

11-22-2021
Date

STATE OF NEW MEXICO
DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES
OIL CONSERVATION DIVISION

APPLICATION OF MANZANO LLC
FOR APPROVAL OF A PRESSURE
MAINTENANCE PROJECT AND
AUTHORIZATION TO INJECT,
LEA COUNTY, NEW MEXICO.

CASE NO. 22357

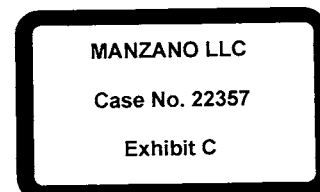
SELF-AFFIRMED STATEMENT
OF MIKE HANAGAN

1. I am the Operations Manger for Manzano LLC (“Manzano”). I am over 18 years of age and competent to provide this Self-Affirmed Statement. I have personal knowledge of the matters addressed herein. I am familiar with the Application in this case and with the engineering matters pertaining to this Application. I have previously testified before the New Mexico Oil Conservation Division (“Division”), and my credentials as an expert were accepted and made a matter of record.

2. Manzano’s Application seeks an order: (1) approving a pressure maintenance project (“Project”) for the injection of produced gas through the Vince BGH #1 well into the Jenkins San Andres pool (Pool Code 33950) within the San Andres formation in a project area (“Project Area”) comprised of SE/4 of Section 30, Township 9 South, Range 35 East, NMPM, Eddy County, New Mexico; and (2) authorizing Manzano to convert the Vince BGH #1 well from a producing well to an injector.

3. Manzano operates the following described wells within or near the Project Area currently producing from the Jenkins San Andres Pool:

- a. **Sodbuster 21 Fee #4H** (API 30-025-43704) horizontally drilled from a surface hole location at 200 FSL, 1650 FWL in Section 21 to a bottom hole location at 330 FNL, 1650 FWL in Section 21;



- b. **Rag Mama 30-19 Fee #1** (API 30-025-44067) horizontally drilled from a surface hole location at 25 FSL, 528 FEL in Section 30 to a bottom hole location at 2303 FSL, 394 FEL in Section 19; and
 - c. **Vince BGH No. 1H** (API No. 30-025-37104) vertically drilled at 1980 FSL, 1750 FEL (Unit J) of Section 30.
4. The injection interval of the Vince BGH No. 1H well (“Vince”) is 4840’ to 4850’.
 5. Manzano proposes to convert its Vince well from a producer into an injection well for pressure maintenance operations for the purpose of; (1) mitigating the flaring of off-spec methane from our Rag Mama & Sodbuster wells, and (2) increasing the ultimate recovery of oil within the interval underlying the Project area.
 6. Manzano proposes to inject produced gas from the Sodbuster 21 Fee #4 and Rag Mama 30-19 Fee #1 into the San Andres formation through a closed system using the Vince well at depths of 4840’ to 4850’ within the San Andres formation.
 7. Specifications and a wellbore schematic for the Vince well is provided at pages 8-11 of Form C-108. The Vince well will be adequately equipped for injection and the construction of the Well will protect fresh water and other hydrocarbon-bearing zones.
 8. The expected average injection rate of produced gas into the Vince well is 150 MCFGPD. The expected maximum injection rate is 1,000 MCFGPD to provide Manzano the option to inject more gas as the GOR increases or if Manzano drills additional wells in the Jenkins San Andres pool.
 9. The expected average injection pressure of produced gas into the Vince well is 500 psi and the proposed maximum injection pressure is 950 psi.
 10. No additional stimulation is planned. The zone has already been acidized with 41,000 gallons of 15% NEFE acid.

11. When we drilled and completed the Rag Mama 30 19 #1H, which at its nearest point is over 1200' east of the Vince, with a frac that included 5,155,137 lbs. of sand, we did not see any effect on the production in the adjacent Vince BGH #1 well. Therefore, the proposed area of the SE/4 of Section 30 is appropriate because the reservoir has low permeability; we do not believe the injected gas will affect reservoir pressure in a larger area. It will take time for the injected gas to affect the Rag Mama 30 19 #1H, but it should help to arrest decline in the well's production. **Exhibit C-1**, is a decline curve of the Rag Mama 30 19 #1H. Based on my professional training and experience, it is my opinion that production will further decline in the absence of pressure maintenance support.

12. Without approval of this application, Manzano, LLC will likely have to plug and abandon the Rag Mama 3019 #1H, the Vince BGH #1, and the Sodbuster 21 #1H wells, because there are no alternatives to comply with the NMOCD no flare rule in this area. This will result in a permanent waste of the oil and gas in these wells. Injection of the gas will allow for the gas that is currently flared to be safely stored in the reservoir, while potentially providing the added benefit of pressure support.

13. It is my opinion that injection operations within the Project are economically and technically feasible and that it is prudent to utilize pressure maintenance operations to maximize oil recovery.

14. Injection of produced gas into the Vince BGH No. 1H well will attempt to eliminate flaring.

15. Manzano has run an MIT test prior to commencing injection and will monitor pressure during injection.

16. The exhibits referenced above were either prepared by me or under my supervision or were compiled from company business records.

17. In my opinion, the granting of Manzano's application would serve the interests of conservation, the prevention of waste, and the protection of correlative rights.

18. I understand this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 17 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.



Mike Hanagan



Date

RAG MAMA

RAG MAMA 30-19 FEE #1H
30-025-44067

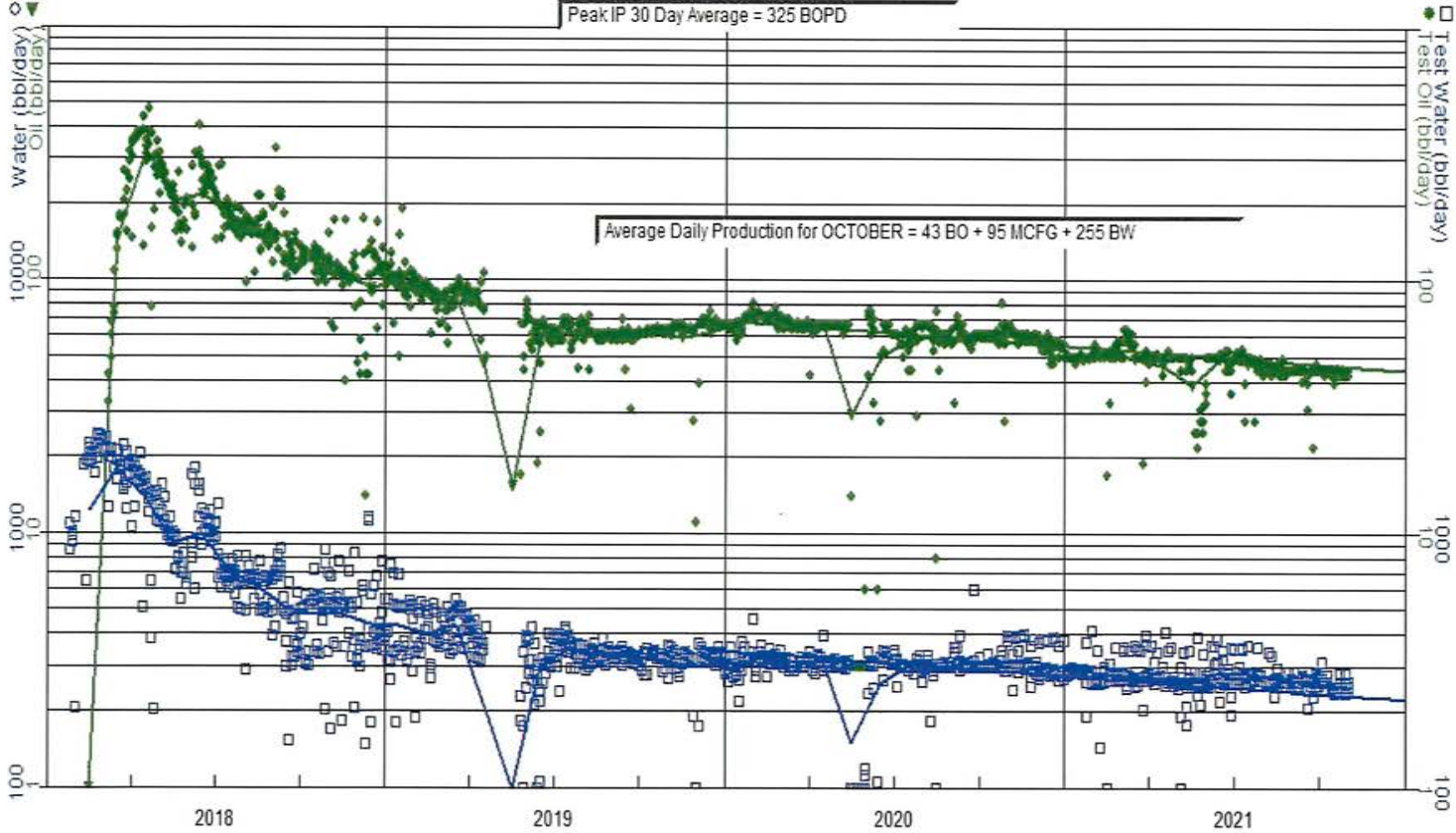
E/2E/2 - 30-9a-35e & E/2SE/4 - 19-9a-35e
LEA, NM
JENKINS, SAN ANDRES

1.5 MILE LATERAL

1st Production 1/24/18 on ESP

PEAK PRODUCTION = 469 BOPD ON 4/17/18

Peak IP 30 Day Average = 325 BOPD



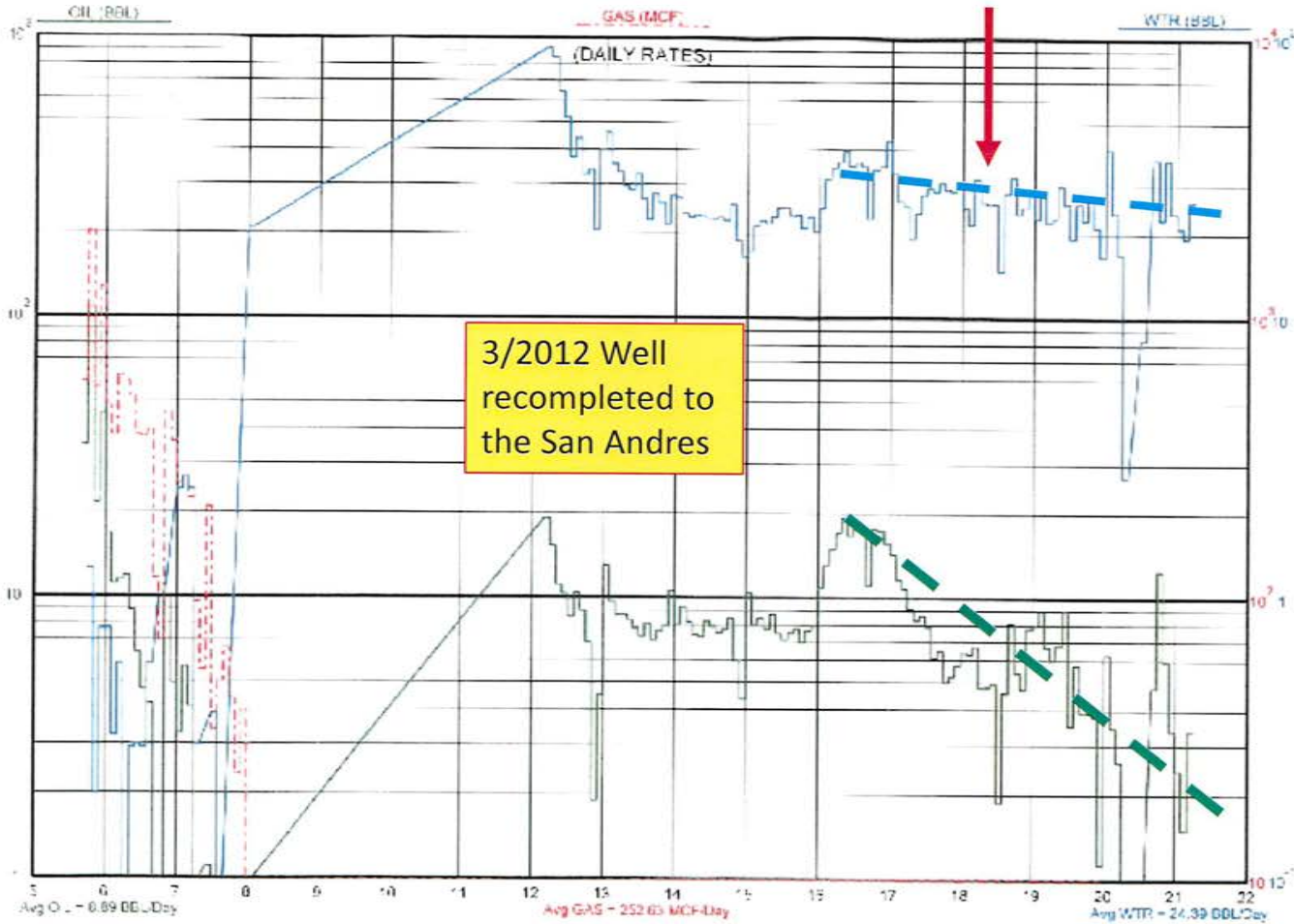
New Oil Cum: 110.22 Mbbbl
Oil Rem: 65.32 Mbbbl
Oil EUR: 178.29 Mbbbl

83.02 MMcf
88.18 MMcf
174.92 MMcf

MANZANO LLC
Case No. 22357
Exhibit C-1

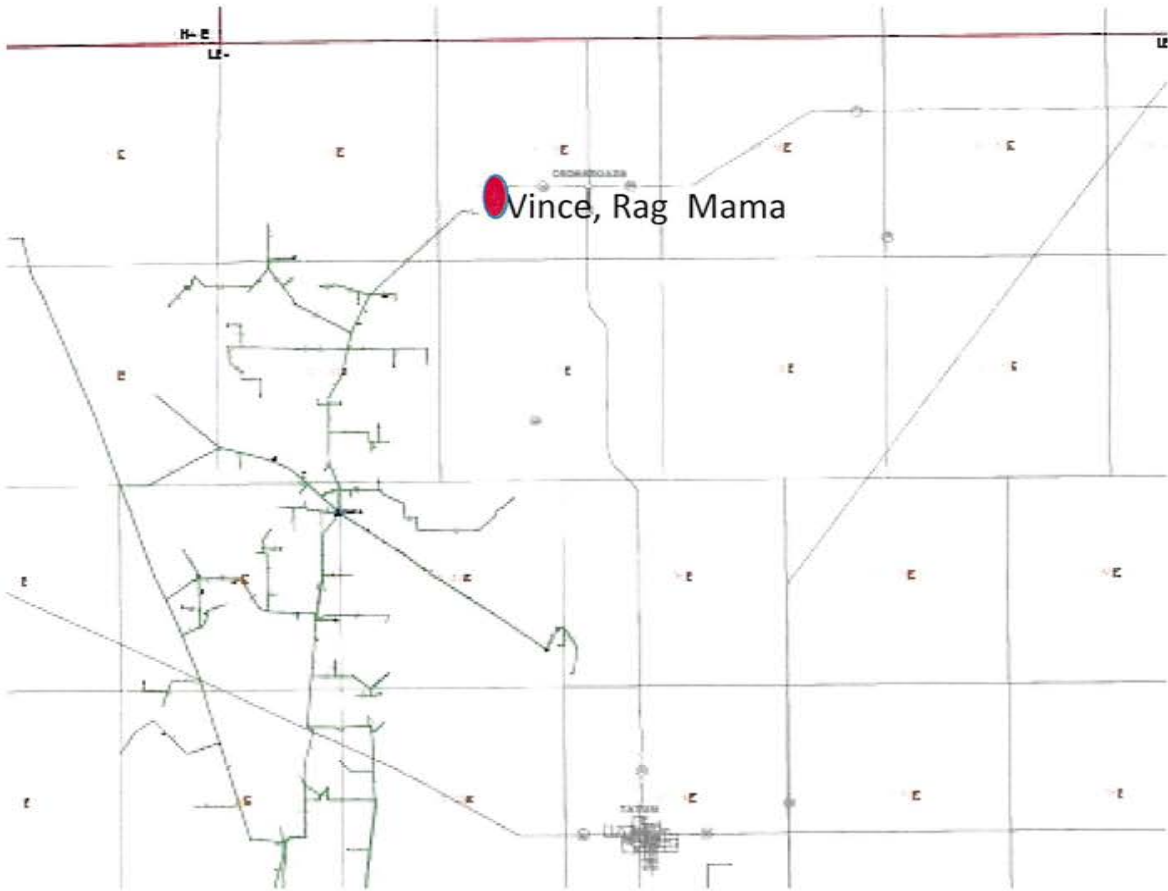
SENManWTX
WSN:54147 WELL: 30-025-37104-0000 (1)
VINCE BGH 1
Vince BGH State #1

2018, Manzano fraced the
offset Rag Mama had no affect
on production of the Vince.



3/2012 Well
recompleted to
the San Andres

This is the production from the Manzano, LLC Vince BGH State #1 in Section 30-T9S-R35E, NWSE. The well was recompleted by Yates to the San Andres at 4840 to 4850 perfs in March 2012. Production through March 2021 is 26,144 BO, and 91,787 BW. Water has been steady while oil production has been falling (see dashed green line projection) This is an uneconomic well Manzano wants to convert to gas injection. .



This is the Targa pipeline system formerly of Agave, that goes to the Vince well. The Vince and Rag Mama wells are located at the northernmost end of this system. It is abandoned coming up to Manzano. Manzano has tried repeatedly to get the gas into this system for the last four years. Targa will not take this gas even if we give it to them.