

RECEIVED: <u>70/25/2018</u>	REVIEWER:	TYPE: <u>SWD</u>	APP NO: <u>DMAM18298 35338</u>
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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: <u>OWL SWD Operating, LLC</u>	OGRID Number: <u>308339</u>
Well Name: <u>Spackler SWD #1</u>	API: _____
Pool: <u>SWD</u>	Pool Code: <u>97869</u>

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

OCT 25 2018 AM 08:58

- 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

Other:

- 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

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

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.

October 17, 2018

Ramona Hovey _____

Print or Type Name

Ramona K Hovey

 Signature

_____ Date

(512) 600-1777

_____ Phone Number

ramona@lonquist.com

_____ e-mail Address

October 17, 2018

New Mexico Energy, Minerals, and Natural Resources Department
Oil Conservation Division District IV
1220 South St. Francis Drive
Santa Fe, New Mexico 87505
(505) 476-3440

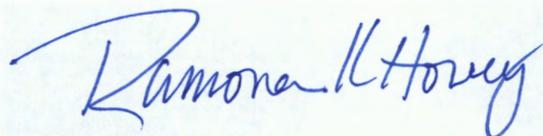
RE: SPACKLER SWD NO. 1 AUTHORIZATION TO INJECT

To Whom It May Concern:

Attached for your review is Form C-108, Application for Authorization to Inject, and its supplemental documents prepared for OWL SWD Operating, LLC's Spackler SWD No. 1. In addition, Forms C-101 and C-102 have been included with this package. Notices have been sent to offset leaseholders and the surface owner. Proof of notice will be sent to the OCD upon receipt.

Any questions should be directed towards OWL SWD Operating, LLC's agent Lonquist & Co., LLC.

Regards,



Ramona K. Hovey
Sr. Petroleum Engineer
Lonquist & Co., LLC
(512) 600-1777
ramona@lonquist.com

APPLICATION FOR AUTHORIZATION TO INJECT

- I. PURPOSE: Secondary Recovery Pressure Maintenance X Disposal Storage
Application qualifies for administrative approval? X Yes No
- II. OPERATOR: OWL SWD Operating, LLC
ADDRESS: 8214 Westchester Drive, Suite 850, Dallas, TX 75255
CONTACT PARTY: Preston Carr PHONE: (855) 695-7937
- 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 X 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: Ramona Hovey TITLE: Consulting Engineer – Agent for OWL SWD Operating, LLC
SIGNATURE: Ramona K Hovey DATE: 10/11/2018
E-MAIL ADDRESS: ramona@lonquist.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: _____

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.

INJECTION WELL DATA SHEET

OPERATOR: OWL SWD Operating, LLC (OGRID 308339)WELL NAME & NUMBER: Spackler SWD No. 1WELL LOCATION: 2,484' FNL & 1,181' FWL
FOOTAGE LOCATIONE
UNIT LETTER21
SECTION23 S
TOWNSHIP33 E
RANGEWELLBORE SCHEMATICWELL CONSTRUCTION DATASurface CasingHole Size: 26"Casing Size: 20"Cemented with: 3,700 sks*or* _____ ft³Top of Cement: surfaceMethod Determined: circulationIntermediate Casing 1Hole Size: 17-1/2"Casing Size: 13-5/8"Cemented with: 3,690 sks*or* _____ ft³Top of Cement: surfaceMethod Determined: circulationIntermediate Casing 2Hole Size: 12-1/4"Casing Size: 9-5/8"Cemented with: 3,140 sks*or* _____ ft³Top of Cement: surfaceMethod Determined: circulation

Production Liner

Hole Size: 8-1/2"

Casing Size: 7-5/8"

Cemented with: 300 sks

or _____ ft³

Top of Cement: 13,900'

Method Determined: Calculation

Total Depth: 18,600'

Injection Interval

17,060 feet to 18,600 feet

(Open Hole)

INJECTION WELL DATA SHEET

Tubing Size: 5.500", 23.0 lb/ft, P-110 BTC and UFJ (or equivalent), from 0' – 17,010'

Lining Material: Duoline

Type of Packer: 7-5/8" x 5.5" D&L Oil Tools Permapack Packer – Single Bore

Packer Setting Depth: 17,010'

Other Type of Tubing/Casing Seal (if applicable): _____

Additional Data

1. Is this a new well drilled for injection? X Yes _____ No

If no, for what purpose was the well originally drilled?

2. Name of the Injection Formation: Silurian-Devonian

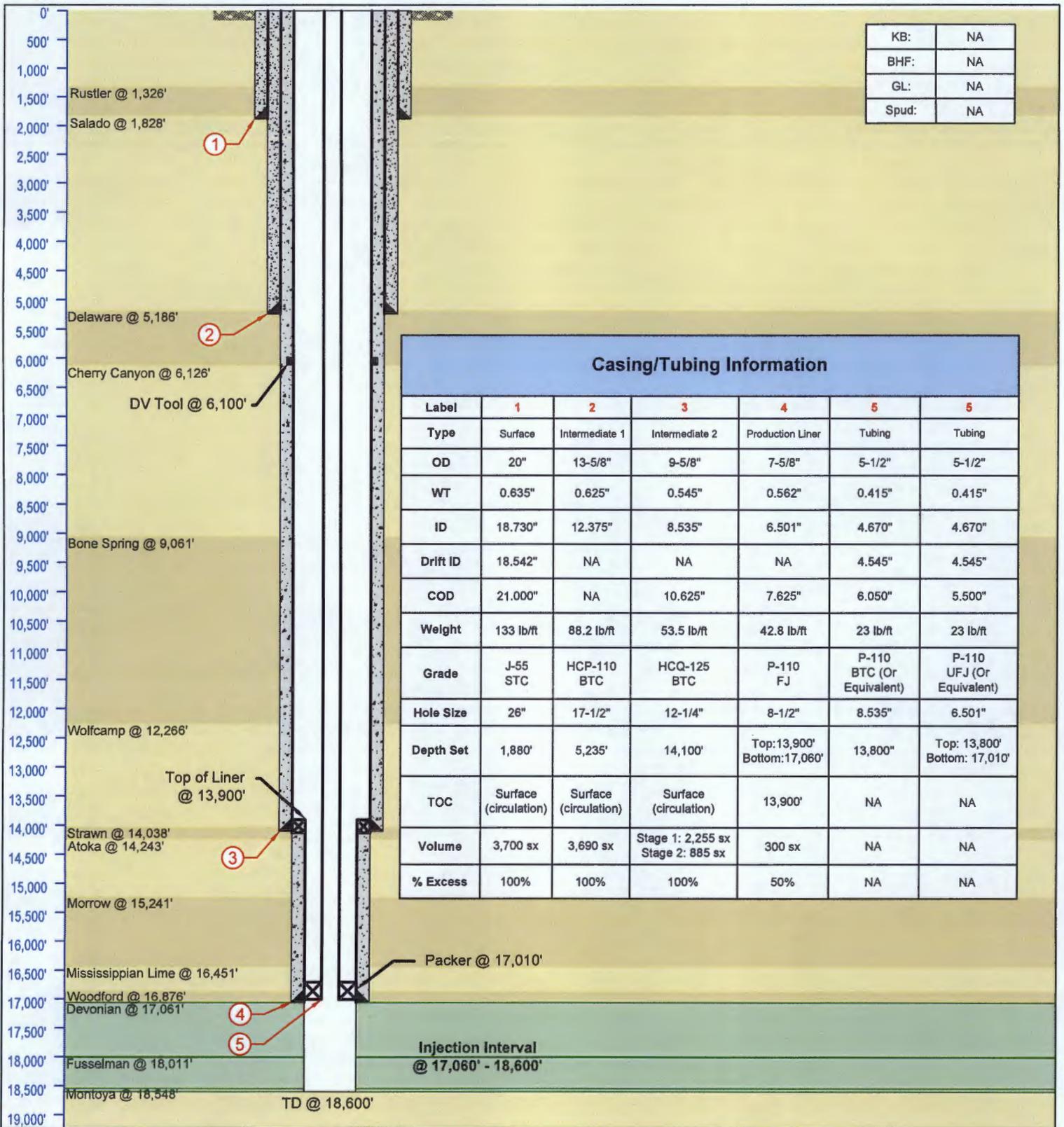
3. Name of Field or Pool (if applicable): _____

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.

No, new drill.

5. Give the name and depths of any oil or gas zones underlying or overlying the proposed injection zone in this area:

Formation	Depth
Delaware	5,186'
Cherry Canyon	6,126'
Bone Spring	9,061'
Wolfcamp	12,266'
Strawn	14,038'
Atoka	14,243'
Morrow	15,241'
Devonian	17,061'



KB:	NA
BHF:	NA
GL:	NA
Spud:	NA

Casing/Tubing Information						
Label	1	2	3	4	5	5
Type	Surface	Intermediate 1	Intermediate 2	Production Liner	Tubing	Tubing
OD	20"	13-5/8"	9-5/8"	7-5/8"	5-1/2"	5-1/2"
WT	0.635"	0.625"	0.545"	0.562"	0.415"	0.415"
ID	18.730"	12.375"	8.535"	6.501"	4.670"	4.670"
Drift ID	18.542"	NA	NA	NA	4.545"	4.545"
COD	21.000"	NA	10.625"	7.625"	6.050"	5.500"
Weight	133 lb/ft	88.2 lb/ft	53.5 lb/ft	42.8 lb/ft	23 lb/ft	23 lb/ft
Grade	J-55 STC	HCP-110 BTC	HCQ-125 BTC	P-110 FJ	P-110 BTC (Or Equivalent)	P-110 UFJ (Or Equivalent)
Hole Size	26"	17-1/2"	12-1/4"	8-1/2"	8.535"	6.501"
Depth Set	1,880'	5,235'	14,100'	Top: 13,900' Bottom: 17,060'	13,800'	Top: 13,800' Bottom: 17,010'
TOC	Surface (circulation)	Surface (circulation)	Surface (circulation)	13,900'	NA	NA
Volume	3,700 sx	3,690 sx	Stage 1: 2,255 sx Stage 2: 885 sx	300 sx	NA	NA
% Excess	100%	100%	100%	50%	NA	NA

LONQUIST & CO. LLC PETROLEUM ENGINEERS ENERGY ADVISORS HOUSTON CALGARY AUSTIN WICHITA DENVER	OWL SWD Operating, LLC	Spackler SWD No. 1	
	Country: USA	State/Province: New Mexico	County/Parish: Lea
Section: 21	Township & Range: 23S, 33E		Survey:
API No: TBD	Field:	Well Type: SWD	
Texas License: F-9147	Well Status: New Drill	Project No: 1793	Date: 10/11/2018
12912 Hill Country Blvd. Ste F-200 Austin, Texas 78738 Tel: 512.732.9812 Fax: 512.732.9816	Drawn: JAM	Reviewed: RH	Approved:
	Rev No: 1	Notes:	

OWL SWD Operating, LLC.

Spackler SWD No. 1

FORM C-108 Supplemental Information

III. Well Data

A. Wellbore Information

1.

Well information	
Lease Name	Spackler SWD
Well No.	1
Location	Unit E S-21 T-23S R-33E
Footage Location	2,484' FNL & 1,181' FWL

2.

a. Wellbore Description

Casing Information				
Type	Surface	Intermediate 1	Intermediate 2	Production Liner
OD	20"	13-5/8"	9-5/8"	7-5/8"
WT	0.635"	0.625"	0.545"	0.562"
ID	18.730"	12.375"	8.535"	6.501"
Drift ID	18.542"		8.379"	6.376"
COD	21.000"		10.625"	7.625"
Weight	133 lb/ft	88.2 lb/ft	53.5 lb/ft	42.8 lb/ft
Grade	J-55 STC	HCP-110 STC (Or Equivalent)	HCQ-125 (Or Equivalent)	P-110 UFJ (Or Equivalent)
Hole Size	26"	17-1/2"	12-1/4"	8-1/2"
Depth Set	1,880'	5,235'	14,100'	13,900' – 17,060'

b. Cementing Program

Cement Information				
Casing String	Surface	Intermediate 1	Production	Production Liner
Lead Cement	HALCEM	HALCEM	Stage 1: NEOCEM Stage 2: NEOCEM	
Lead Cement Volume	2,680 sks	3,145 sks	Stage 1: 1630 sks Stage 2: 785 sks	
Tail Cement	HALCEM	HALCEM	Stage 1: NEOCEM Stage 2: HALCEM	VERSACEM
Tail Cement Volume	1,020 sks	545 sks	Stage 1: 625 sks Stage 2: 100 sks	300 sks
Cement Excess	100%	100%	100%	50%
TOC	Surface	Surface	Surface	13,900'
Method	Circulate to Surface	Circulate to Surface	Circulate to Surface	Calculation

3. Tubing Description

Tubing		
OD	5-1/2"	5-1/2"
WT	0.415"	0.415"
ID	4.670"	4.670"
Drift ID	4.545"	4.545"
COD	6.050"	5.500"
Weight	23 lb/ft	23 lb/ft
Grade	P-110 BTC (Or Equivalent)	P-110 UFJ (Or Equivalent)
Depth Set	13,800'	13,800'-17,010'

Tubing will be lined with Duoline.

4. Packer Description

D&L Oil Tools 7-5/8" x 5-1/2" Permapack Packer – Single Bore

B. Completion Information

1. Injection Formation: Silurian - Devonian
2. Gross Injection Interval: 17,060' – 18,600'

Completion Type: Open Hole

3. Drilled for injection.
4. See the attached wellbore schematic.
5. Oil and Gas Bearing Zones within area of well:

Formation	Depth
Delaware	5,186'
Cherry Canyon	6,126'
Bone Spring	9,061'
Wolfcamp	12,266'
Strawn	14,038'
Atoka	14,243'
Morrow	15,241'
Devonian	17,061'

VI. Area of Review

No wells within the one-mile AOR penetrated the proposed injection zone.

VII. Proposed Operation Data

1. Proposed Daily Rate of Fluids to be Injection:

Average Volume: 20,000 BPD
Maximum Volume: 30,000 BPD

2. Closed System

3. Anticipated Injection Pressure:

Average Injection Pressure: 2,559 PSI (surface pressure)
Maximum Injection Pressure: 3,412 PSI (surface pressure)

4. The injection fluid is to be locally produced water. Attached are produced water sample analyses taken from the closest wells that feature samples from the Bone Springs and Delaware formations.

5. The Devonian Formation is productive of oil and gas in this area.

VIII. Geological Data

The Devonian formation is a dolomitic ramp carbonate that occurs below the Woodford shale and above the Fusselman formation. Strata found in the Devonian formation near Jal are two major groups, the Wristen Buildups and the Thirtyone Deepwater Chert, with the Wristen being more abundant. The Wristen Groups is composed of mixed limestone and dolomites with mudstone to grainstone and boundstone textures. Porosity in the Wristen group is a result of both primary and secondary development. Present are moldic, vugular, karstic (including collapse breccia) features that allow for higher porosities and permeabilities. The Thirtyone Formation contains two end-member reservoir facies, skeletal packstones/grainstones and spiculitic chert, with most of the porosity and permeability found in the coarsely crystalline cherty dolomite. These particular characteristics allow for this formation to be a successful Salt Water Disposal horizon.

A. Injection Zone: Devonian-Silurian Formation

Formation	Depth
Rustler	1,326'
Salado	1,828'
Delaware	5,186'
Cherry Canyon	6,126'
Bone Spring	9,061'
Wolfcamp	12,266'
Strawn	14,038'
Atoka	14,243'
Morrow	15,241'
Mississippian Lime	16,451'
Woodford	16,876'
Devonian	17,061'
Fusselman	18,011'
Montoya	18,548'

B. Underground Sources of Drinking Water

Water wells in the one-mile surrounding area for the proposed Spackler SWD No.1 well are at depths ranging from 550 ft to 650 ft. The Rustler may also be another USDW and will be protected through the top of the Salado Formation at 1,828' by setting surface casing at 1,880'.

IX. Proposed Stimulation Program

No proposed stimulation program.

X. Logging and Test Data on the Well

There are no existing logs or test data on the well. During the process of drilling and completion resistivity, gamma ray, and density logs will be run.

XI. Chemical Analysis of Fresh Water Wells

There are three (3) fresh water wells within one mile of the well location, per the New Mexico Office of the State Engineer. A list of all the water wells, a map of these wells and their associated Water Right Summaries are attached. Fresh water samples will be obtained from two of the wells and analysis of these samples will be submitted as soon as possible.

XII. Affirmative Statement of Examination of Geologic and Engineering Data

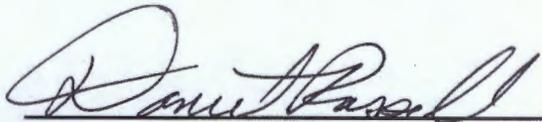
Based on the available engineering and geologic data we find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water.

Affidavit of Publication

STATE OF NEW MEXICO
COUNTY OF LEA

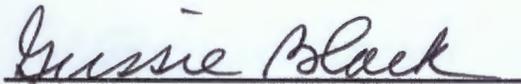
I, Daniel Russell, Publisher of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, solemnly swear that the clipping attached hereto was published in the regular and entire issue of said newspaper, and not a supplement thereof for a period of 1 issue(s).

Beginning with the issue dated
October 14, 2018
and ending with the issue dated
October 14, 2018.



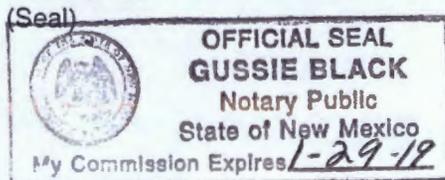
Publisher

Sworn and subscribed to before me this
14th day of October 2018.



Business Manager

My commission expires
January 29, 2019



This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937 and payment of fees for said

LEGALS

LEGAL NOTICE OCTOBER 14, 2018

OWL SWD Operating, LLC, 8214 Westchester Dr., Suite 850, Dallas, Texas 75255, is filling Form C-108 (Application for Authorization to Inject) with the New Mexico Oil Conservation Division for administrative approval for its salt water disposal well Spackler SWD No. 1. The proposed well will be located 2,484' FNL & 1,181' FWL in Section 21, Township 23S, Range 33E in Lea County, New Mexico. Disposal water will be sourced from area production, and will be injected into the Devonian-Silurian Formation (determined by offset log analysis) through an open hole completion between a maximum applied for top of 17,060 feet to a maximum depth of 18,600 feet. The maximum surface injection pressure will not exceed 3,412 psi with a maximum rate of 30,000 BWPD. Interested parties opposing the action must file objections or requests for hearing with the Oil Conservation Division, 1220 South St. Francis Drive, Santa Fe, New Mexico 87505, within 15 days. Additional information can be obtained from the applicant's agent, Lonquist & Co., LLC, at (512) 600-1774. #33328

67112661

00219438

LONQUIST & CO., LLC
12912 HILL COUNTRY BLVD, STE F200
AUSTIN, TX 78738

WATER WELL SUMMARIES

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy Minerals and Natural Resources
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-101
Revised July 18, 2013

AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator Name and Address OWL SWD Operating, LLC 8214 Westchester Drive, Suite 850, Dallas, TX 75255		² OGRID Number 308339
		³ API Number 30-025-
⁴ Property Code	⁵ Property Name Spackler SWD	⁶ Well No. 1

7. Surface Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County
E	21	23S	33E		2,484	North	1,181	West	Lea

8. Proposed Bottom Hole Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County

9. Pool Information

Pool Name SWD; Silurian-Devonian	Pool Code 97869
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Additional Well Information

¹¹ Work Type N	¹² Well Type SWD	¹³ Cable/Rotary R	¹⁴ Lease Type Private	¹⁵ Ground Level Elevation 3,715'
¹⁶ Multiple N	¹⁷ Proposed Depth 18,600'	¹⁸ Formation Silurian-Devonian	¹⁹ Contractor TBD	²⁰ Spud Date ASAP
Depth to Ground water 400'		Distance from nearest fresh water well 3195'		Distance to nearest surface water +1 mi

We will be using a closed-loop system in lieu of lined pits

21. Proposed Casing and Cement Program

Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
Surface	26"	20"	133.0 lb/ft	1,880'	3,700 sks	Surface
Intermediate	17.5"	13.625"	88.2 lb/ft	5,235'	3,690 sks	Surface
Production	12.25"	9.625"	53.5 lb/ft	14,100'	3,140 sks	Surface
Liner	8.5"	7.625"	42.8 lb/ft	17,010'	300 sks	13,900'
Tubing	N/A	5.5"	23 lb/ft	17,010'	N/A	N/A

Casing/Cement Program: Additional Comments

See attached schematic.

22. Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
Double Hydraulic/ Blinds, Pipe	10,000 psi	8,000 psi	TBD (Schaffer/Cameron)

²³ I hereby certify that the information given above is true and complete to the best of my knowledge and belief.
I further certify that I have complied with 19.15.14.9 (A) NMAC and/or 19.15.14.9 (B) NMAC , if applicable.
Signature: *Ramona K Hovey*

OIL CONSERVATION DIVISION

Approved By:

Printed name: Ramona Hovey

Title:

Title: Consulting Engineer- Agent for OWL SWD Operating, LLC

Approved Date:

Expiration Date:

E-mail Address: ramona@lonquist.com

Date: 10/17/2018

Phone: 512-600-1777

Conditions of Approval Attached

C-102 WELL LOCATION PLAT

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., Artesia, NM 88210
District III
1000 Rio Brazon Road, Artcc, NM 87410
District IV
1220 S. St Francis Dr., NM 87505
Phone: (505) 476-3460 Fax (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102

Revised August 1, 2011

Submit one copy to appropriate District Office

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number		² Pool Code 97869		³ Pool Name SWD; Silurian-Devonian	
⁴ Property Code		⁵ Property Name SPACKLER SWD		⁶ Well Number #1	
⁷ OGRID No. 308339		⁸ Operator Name OWL SWD OPERATING		⁹ Elevation 3715.48'	

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	21	23 S	33 E		2484	NORTH	1181	WEST	LEA

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

¹² Dedicated Acres	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

¹⁶

GEODETIC DATA
NAD 83 GRID - NM EAST

SPACKLER SWD NO. 1
Y= 470286.82 N
X= 773509.82 E
LAT= 32.290657 N
LONG= 103.581991 W

1 - Y= 472764.51, X= 772310.16
2 - Y= 472794.54, X= 777582.94
3 - Y= 467509.16, X= 777624.68
4 - Y= 467476.48, X= 772349.19

¹⁷ OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Kimone Hony 10/18/18
Signature Date

RAMONA HONEY
Printed Name Date

ramona@lonquist.com
Email Address Date

¹⁸ SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

Oct 18, 2018
Date of Survey Date

Jeffrey E. Hudson
Signature and Seal of Professional Surveyor

JEFFREY E. HUDSON
NEW MEXICO
20559
PROFESSIONAL SURVEYOR

Certificate Number
20559

PROOF OF NOTICES SENT

Spackler SWD #1 Notice List

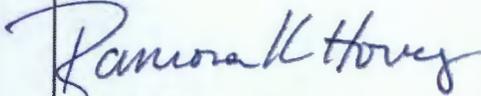
Lea County, NM

OWL SWD Operating, LLC

S/T/R	UNIT	REGULATORY	MAILING ADDRESS
		SURFACE OWNER	MAILING ADDRESS
		HUGHES PROPERTIES LLC	PO BOX 5097 CARLSBAD, NM 88221
		MINERAL LESSEE	MAILING ADDRESS
17/23S/33E	N	COG OPERATING LLC	550 W TEXAS MIDLAND, TX 79701
21/23S/33E	C,D,E,K,L,M,N	CONOCOPHILLIPS CO	PO BOX 7500 BARTLESVILLE, OK 74005
		OFFSET OPERATORS	MAILING ADDRESS
29/23S/33E	A,B,C,G,H	OXY USA INC	PO BOX 4294 HOUSTON, TX 77210
15/23S/33E 22/23S/33E 21/23S/33E 20/23S/33E 28/23S/33E 27/23S/33E	M D,E,L,M A,B,G,H,I,J,O,P C,D,E,F,K,L,M A,B,C,D,E,F,G,H D	DEVON ENERGY PRODUCTION COMPANY, LP	20 N BROADWAY OKLAHOMA CITY, OK 73102
17/23S/33E 16/23S/33E 21/23S/33E 20/23S/33E	H,I,J,O,P L F A,B,G,H,I,J,O,P	COG OPERATING LLC	ONE CONCHO CENTER 600 W. ILLINOIS AVE MIDLAND, TX 79701
16/23S/33E	E,F,I,J,K,L,M,N,O .P	COG PRODUCTION LLC	PO BOX 2064 MIDLAND, TX 79702
		OTHER PARTIES	MAILING ADDRESS
N/A		BUREAU OF LAND MANAGEMENT	310 DINOSAUR TRAIL SANTA FE, NM 87502

Notices were sent on 10/17/2018 for the Spackler SWD #1 application by mailing them a copy of the Form C-108. Proof of receipt of notice will be submitted to the OCD under separate cover.

Sincerely,



Ramona K. Hovey
Sr. Petroleum Engineer / Lonquist & Co., LLC
For OWL SWD Operating, LLC

CERTIFIED MAIL



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 \$ 1793

Sent To Bureau of Land Mgmt Owl
 Street and Apt. No., or PO Box No. 310 Dinosaur Trail
 City, State, ZIP+4® Santa Fe, NM 87502

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

Bureau of Land Management
310 Dinosaur Trail
Santa Fe, New Mexico 87502

2. Article Number (Transfer from service label)
7016 0600 0000 2971 0717

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X
 Agent
 Addressee

B. Received by (Printed Name) _____ C. Date of Delivery _____

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

1793 Spackler 2nd #1 Owl

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 Signature Confirmation Restricted Delivery

Domestic Return Receipt

CERTIFIED MAIL



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 \$ 1793

Sent To COG Operating LLC Owl
 Street and Apt. No., or PO Box No. 550 W Texas
 City, State, ZIP+4® Midland, Texas 79701

PS Form 3800, April 2015 PSN 7530-02-000-9053 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.

2. Article Number (Transfer from service label)
7016 0600 0000 2971 0724

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X
 Agent
 Addressee

B. Received by (Printed Name) _____ C. Date of Delivery _____

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

1793 Spackler 2nd #1 Owl

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 Signature Confirmation Restricted Delivery

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 _____

Postmark Here _____

1793
 Spackler Sub #1
 Deal
 here
 Eddy

COG Operating, LLC
 One Concho Center
 600 W. Illinois Avenue
 Midland, Texas 79701

PS Form 3800, April 2015 PSN 7530-02-000-9053

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

COG Operating, LLC
 One Concho Center
 600 W. Illinois Avenue
 Midland, Texas 79701

2. Article Number (Transfer from service label)

7016 0600 0000 2971 0731

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name) _____ C. Date of Delivery _____

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

1793 Spackler Sub #1 Deal

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

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

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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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 _____

Postmark Here _____

1793
 Spackler Sub #1
 Deal
 here
 Eddy

COG Production, LLC
 P. O. Box 2064
 Midland, Texas 79702

PS Form 3800, April 2015 PSN 7530-02-000-9053

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

COG Production, LLC
 P. O. Box 2064
 Midland, Texas 79702

2. Article Number (Transfer from service label)

7016 0600 0000 2971 0731

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name) _____ C. Date of Delivery _____

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

1793 Spackler Sub #1 Deal

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

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

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. DO NOT COVER LINE.

CERTIFIED MAIL



7016 0600 0000 2971 0755
7016 0600 0000 2971 0755

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 *1793 Spackler SW #1 Owp*

Postmark Here

Conoco Phillips Company
 P. O. Box 7500
 Bartlesville, Oklahoma 74005

PS Form 3800, April 2015 PSN 7530-02-000-9053 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.

Conoco Phillips Company
 P. O. Box 7500
 Bartlesville, Oklahoma 74005

9590 9402 3572 7305 4564 96

2. Article Number (Transfer from service label)
 7016 0600 0000 2971 0755

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

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

1793 Spackler SW #1 Owp

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

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

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. DO NOT COVER LINE.

CERTIFIED MAIL



7016 0600 0000 2971 0762
7016 0600 0000 2971 0762

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 *1793 Spackler SW #1 Owp*

Postmark Here

Devon Energy Production Co.
 20 N Broadway
 Oklahoma City, OK 73102

PS Form 3800, April 2015 PSN 7530-02-000-9053 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.

Devon Energy Production Co., LP
 20 North Broadway
 Oklahoma City, OK 73102

9590 9402 3572 7305 4565 02

2. Article Number (Transfer from service label)
 7016 0600 0000 2971 0762

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

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

1793 Spackler SW #1 Owp

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

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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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 \$ _____

Postmark Here

Postage \$ _____

1793 Spackler SWD #1
 Owl
 Lee
 Eddy

Hughes Properties, LLC
 P. O. Box 5097
 Carlsbad, New Mexico 88221

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

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:

Hughes Properties, LLC
 P. O. Box 5097
 Carlsbad, New Mexico 88221

2. Article Number (Transfer from service label)

7016 0600 0000 2971 0779

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

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

1793 Spackler SWD #1 Owl

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

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Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Domestic Return Receipt

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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 \$ _____

Postmark Here

Postage \$ _____

1793 Spackler SWD #1
 Owl
 Lee
 Eddy

OXY USA, Inc.
 P. O. Box 4294
 Houston, Texas 77210

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

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:

OXY USA, Inc.
 P. O. Box 4294
 Houston, Texas 77210

2. Article Number (Transfer from service label)

7016 0600 0000 2971 0786

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

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

1793 Spackler SWD #1 Owl

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

Domestic Return Receipt

LONQUIST & CO. LLC

AUSTIN
HOUSTON

PETROLEUM
ENGINEERS

ENERGY
ADVISORS

WICHITA
CALGARY

www.lonquist.com

October 10, 2018

BUREAU OF LAND MANAGEMENT
310 DINOSAUR TRAIL
SANTA FE, NM 87502

Subject: Spackler SWD No. 1 Authorization to Inject

To Whom It May Concern:

Attached for your review is Form C-108, Application for Authorization to Inject, and its supplemental documents prepared for OWL SWD Operating, LLC's Spackler SWD No. 1 well. Section XIV of Form C-108 requires that the surface land owner on which the well is located and each leasehold operator within a one-half mile radius of the proposed well location be furnished with the application.

According to the New Mexico Oil Conservation Division, surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date in which this application was mailed to them.

Any questions should be directed towards OWL SWD Operating, LLC's agent, Lonquist & Co., LLC.

Regards,



Stephen L. Pattee, P.G.
Regulatory Manager
Lonquist & Co., LLC

(512) 600-1774
steve@lonquist.com

LONQUIST & CO. LLC

AUSTIN
HOUSTON

PETROLEUM
ENGINEERS

ENERGY
ADVISORS

WICHITA
CALGARY

www.lonquist.com

October 10, 2018

COG OPERATING LLC
550 W TEXAS
MIDLAND, TX 79701

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Regards,



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Regulatory Manager
Lonquist & Co., LLC

(512) 600-1774
steve@lonquist.com

LONQUIST & CO. LLC

AUSTIN
HOUSTON

PETROLEUM
ENGINEERS

ENERGY
ADVISORS

WICHITA
CALGARY

www.lonquist.com

October 10, 2018

COG OPERATING LLC
ONE CONCHO CENTER
600 W. ILLINOIS AVE
MIDLAND, TX 79701

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Regulatory Manager
Lonquist & Co., LLC

(512) 600-1774
steve@lonquist.com

LONQUIST & CO. LLC

AUSTIN
HOUSTON

PETROLEUM
ENGINEERS

ENERGY
ADVISORS

WICHITA
CALGARY

www.lonquist.com

October 10, 2018

COG PRODUCTION LLC
PO BOX 2064
MIDLAND, TX 79702

Subject: Spackler SWD No. 1 Authorization to Inject

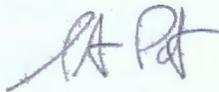
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Regulatory Manager
Lonquist & Co., LLC

(512) 600-1774
steve@lonquist.com

LONQUIST & CO. LLC

AUSTIN
HOUSTON

PETROLEUM
ENGINEERS

ENERGY
ADVISORS

WICHITA
CALGARY

www.lonquist.com

October 10, 2018

CONOCOPHILLIPS CO
PO BOX 7500
BARTLESVILLE, OK 74005

Subject: Spackler SWD No. 1 Authorization to Inject

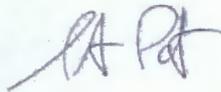
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Regards,



Stephen L. Pattee, P.G.
Regulatory Manager
Lonquist & Co., LLC

(512) 600-1774
steve@lonquist.com

LONQUIST & CO. LLC

AUSTIN
HOUSTON

PETROLEUM
ENGINEERS

ENERGY
ADVISORS

WICHITA
CALGARY

www.lonquist.com

October 10, 2018

DEVON ENERGY PRODUCTION COMPANY, LP
20 N BROADWAY
OKLAHOMA CITY, OK 73102

Subject: Spackler SWD No. 1 Authorization to Inject

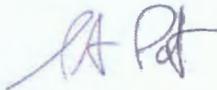
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Regards,



Stephen L. Pattee, P.G.
Regulatory Manager
Lonquist & Co., LLC

(512) 600-1774
steve@lonquist.com

LONQUIST & CO. LLC

AUSTIN
HOUSTON

PETROLEUM
ENGINEERS

ENERGY
ADVISORS

WICHITA
CALGARY

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October 10, 2018

HUGHES PROPERTIES LLC
PO BOX 5097
CARLSBAD, NM 88221

Subject: Spackler SWD No. 1 Authorization to Inject

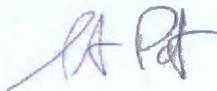
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Regulatory Manager
Lonquist & Co., LLC

(512) 600-1774
steve@lonquist.com

LONQUIST & CO. LLC

AUSTIN
HOUSTON

PETROLEUM
ENGINEERS

ENERGY
ADVISORS

WICHITA
CALGARY

www.lonquist.com

October 10, 2018

OXY USA INC
PO BOX 4294
HOUSTON, TX 77210

Subject: Spackler SWD No. 1 Authorization to Inject

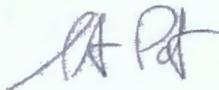
To Whom It May Concern:

Attached for your review is Form C-108, Application for Authorization to Inject, and its supplemental documents prepared for OWL SWD Operating, LLC's Spackler SWD No. 1 well. Section XIV of Form C-108 requires that the surface land owner on which the well is located and each leasehold operator within a one-half mile radius of the proposed well location be furnished with the application.

According to the New Mexico Oil Conservation Division, surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date in which this application was mailed to them.

Any questions should be directed towards OWL SWD Operating, LLC's agent, Lonquist & Co., LLC.

Regards,



Stephen L. Pattee, P.G.
Regulatory Manager
Lonquist & Co., LLC

(512) 600-1774
steve@lonquist.com

APPLICATION FOR AUTHORIZATION TO INJECT

- I. PURPOSE: Secondary Recovery Pressure Maintenance Disposal Storage
Application qualifies for administrative approval? Yes No
- II. OPERATOR: OWL SWD Operating, LLC
ADDRESS: 8214 Westchester Drive, Suite 850, Dallas, TX 75255
CONTACT PARTY: Preston Carr PHONE: (855) 695-7937
- 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: Ramona Hovey TITLE: Consulting Engineer – Agent for OWL SWD Operating, LLC
SIGNATURE: Ramona Hovey DATE: 10/11/2018
E-MAIL ADDRESS: ramona@lonquist.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: _____

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.

INJECTION WELL DATA SHEET

OPERATOR: OWL SWD Operating, LLC (OGRID 308339)

WELL NAME & NUMBER: Spackler SWD No. 1

WELL LOCATION: 2,484' FNL & 1,181' FWL
FOOTAGE LOCATION

E
UNIT LETTER

21
SECTION

23 S
TOWNSHIP

33 E
RANGE

WELLBORE SCHEMATIC

WELL CONSTRUCTION DATA

Surface Casing

Hole Size: 26"

Casing Size: 20"

Cemented with: 3,700 sks

or _____ ft³

Top of Cement: surface

Method Determined: circulation

Intermediate Casing 1

Hole Size: 17-1/2"

Casing Size: 13-5/8"

Cemented with: 3,690 sks

or _____ ft³

Top of Cement: surface

Method Determined: circulation

Intermediate Casing 2

Hole Size: 12-1/4"

Casing Size: 9-5/8"

Cemented with: 3,140 sks

or _____ ft³

Top of Cement: surface

Method Determined: circulation

Production Liner

Hole Size: 8-1/2"

Casing Size: 7-5/8"

Cemented with: 300 sks

or _____ ft³

Top of Cement: 13,900'

Method Determined: Calculation

Total Depth: 18,600'

Injection Interval

17,060 feet to 18,600 feet

(Open Hole)

INJECTION WELL DATA SHEET

Tubing Size: 5.500", 20.0 lb/ft, P-110 BTC and UFJ (or equivalent), from 0' – 17,010'

Lining Material: Duoline

Type of Packer: 7-5/8" x 5.5" D&L Oil Tools Permapack Packer – Single Bore

Packer Setting Depth: 17,010'

Other Type of Tubing/Casing Seal (if applicable): _____

Additional Data

1. Is this a new well drilled for injection? X Yes No

If no, for what purpose was the well originally drilled?

2. Name of the Injection Formation: Silurian-Devonian

3. Name of Field or Pool (if applicable): _____

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.

No, new drill.

5. Give the name and depths of any oil or gas zones underlying or overlying the proposed injection zone in this area:

Formation	Depth
Delaware	5,186'
Cherry Canyon	6,126'
Bone Spring	9,061'
Wolfcamp	12,266'
Strawn	14,038'
Atoka	14,243'
Morrow	15,241'
Devonian	17,061'

OWL SWD Operating, LLC.

Spackler SWD No. 1

FORM C-108 Supplemental Information

III. Well Data

A. Wellbore Information

1.

Well information	
Lease Name	Spackler SWD
Well No.	1
Location	Unit E S-21 T-23S R-33E
Footage Location	2,484' FNL & 1,181' FWL

2.

a. Wellbore Description

Casing Information				
Type	Surface	Intermediate 1	Intermediate 2	Production Liner
OD	20"	13-5/8"	9-5/8"	7-5/8"
WT	0.635"	0.625"	0.545"	0.562"
ID	18.730"	12.375"	8.535"	6.501"
Drift ID	18.542"		8.379"	6.376"
COD	21.000"		10.625"	7.625"
Weight	133 lb/ft	88.2 lb/ft	53.5 lb/ft	42.8 lb/ft
Grade	J-55 STC	HCP-110 STC (Or Equivalent)	HCQ-125 (Or Equivalent)	P-110 UFJ (Or Equivalent)
Hole Size	26"	17-1/2"	12-1/4"	8-1/2"
Depth Set	1,880'	5,235'	14,100'	13,900' – 17,060'

b. Cementing Program

Cement Information				
Casing String	Surface	Intermediate 1	Production	Production Liner
Lead Cement	HALCEM	HALCEM	Stage 1: NEOCEM Stage 2: NEOCEM	
Lead Cement Volume	2,680 sks	3,145 sks	Stage 1: 1630 sks Stage 2: 785 sks	
Tail Cement	HALCEM	HALCEM	Stage 1: NEOCEM Stage 2: HALCEM	VERSACEM
Tail Cement Volume	1,020 sks	545 sks	Stage 1: 625 sks Stage 2: 100 sks	300 sks
Cement Excess	100%	100%	100%	50%
TOC	Surface	Surface	Surface	13,900'
Method	Circulate to Surface	Circulate to Surface	Circulate to Surface	Calculation

3. Tubing Description

Tubing		
OD	5-1/2"	5-1/2"
WT	0.361"	0.361"
ID	4.778"	4.778"
Drift ID	4.653"	4.653"
COD	6.050"	5.500"
Weight	20 lb/ft	20 lb/ft
Grade	P-110 BTC (Or Equivalent)	P-110 UFJ (Or Equivalent)
Depth Set	13,800'	13,800'-17,010'

Tubing will be lined with Duoline.

4. Packer Description

D&L Oil Tools 7-5/8" x 5-1/2" Permapack Packer – Single Bore

B. Completion Information

1. Injection Formation: Silurian - Devonian
2. Gross Injection Interval: 17,060' – 18,600'

Completion Type: Open Hole

3. Drilled for injection.
4. See the attached wellbore schematic.
5. Oil and Gas Bearing Zones within area of well:

Formation	Depth
Delaware	5,186'
Cherry Canyon	6,126'
Bone Spring	9,061'
Wolfcamp	12,266'
Strawn	14,038'
Atoka	14,243'
Morrow	15,241'
Devonian	17,061'

VI. Area of Review

No wells within the one-mile AOR penetrated the proposed injection zone.

VII. Proposed Operation Data

1. Proposed Daily Rate of Fluids to be Injection:

Average Volume: 20,000 BPD
Maximum Volume: 30,000 BPD

2. Closed System

3. Anticipated Injection Pressure:

Average Injection Pressure: 2,559 PSI (surface pressure)
Maximum Injection Pressure: 3,412 PSI (surface pressure)

4. The injection fluid is to be locally produced water. Attached are produced water sample analyses taken from the closest wells that feature samples from the Bone Springs and Delaware formations.

5. The Devonian Formation is productive of oil and gas in this area.

VIII. Geological Data

The Devonian formation is a dolomitic ramp carbonate that occurs below the Woodford shale and above the Fusselman formation. Strata found in the Devonian formation near Jal are two major groups, the Wristen Buildups and the Thirtyone Deepwater Chert, with the Wristen being more abundant. The Wristen Groups is composed of mixed limestone and dolomites with mudstone to grainstone and boundstone textures. Porosity in the Wristen group is a result of both primary and secondary development. Present are moldic, vugular, karstic (including collapse breccia) features that allow for higher porosities and permeabilities. The Thirtyone Formation contains two end-member reservoir facies, skeletal packstones/grainstones and spiculitic chert, with most of the porosity and permeability found in the coarsely crystalline cherty dolomite. These particular characteristics allow for this formation to be a successful Salt Water Disposal horizon.

A. Injection Zone: Devonian-Silurian Formation

Formation	Depth
Rustler	1,326'
Salado	1,828'
Delaware	5,186'
Cherry Canyon	6,126'
Bone Spring	9,061'
Wolfcamp	12,266'
Strawn	14,038'
Atoka	14,243'
Morrow	15,241'
Mississippian Lime	16,451'
Woodford	16,876'
Devonian	17,061'
Fusselman	18,011'
Montoya	18,548'

B. Underground Sources of Drinking Water

Water wells in the one-mile surrounding area for the proposed Spackler SWD No.1 well are at depths ranging from 550 ft to 650 ft. The Rustler may also be another USDW and will be protected through the top of the Salado Formation at 1,828' by setting surface casing at 1,880'.

AUSTIN
HOUSTON

PETROLEUM
ENGINEERS

ENERGY
ADVISORS

WICHITA
CALGARY

www.lonquist.com

November 1, 2018

New Mexico Energy, Minerals, and Natural Resources Department
Oil Conservation Division District IV
1220 South St. Francis Drive
Santa Fe, New Mexico 87505
(505) 476-3440

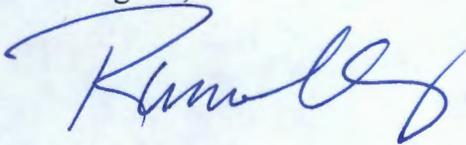
RE: SPACKLER SWD NO. 1 AUTHORIZATION TO INJECT; PROOF OF NOTICE

To Whom It May Concern:

Attached for your review, as part of the Form C-108, Application for Authorization to Inject for OWL SWD Operating, LLC's Spackler SWD No. 1, are the proofs of notice of the identified affected parties having received notice as attached. In the interest of minimizing printing, one full version of the notice is included plus the cover letters for each party, the sent receipts and the proof of delivery.

Any questions should be directed towards OWL SWD Operating, LLC's agent Lonquist & Co., LLC.

Regards,



Ramona K. Hovey
Sr. Petroleum Engineer
Lonquist & Co., LLC
(512) 600-1777
ramona@lonquist.com

Spackler SWD #1 Notice List

Lea County, NM

OWL SWD Operating, LLC

S/T/R	UNIT	REGULATORY	MAILING ADDRESS
		SURFACE OWNER	MAILING ADDRESS
		HUGHES PROPERTIES LLC	PO BOX 5097 CARLSBAD, NM 88221
		MINERAL LESSEE	MAILING ADDRESS
17/23S/33E	N	COG OPERATING LLC	550 W TEXAS MIDLAND, TX 79701
21/23S/33E	C,D,E,K,L,M,N	CONOCOPHILLIPS CO	PO BOX 7500 BARTLESVILLE, OK 74005
		OFFSET OPERATORS	MAILING ADDRESS
29/23S/33E	A,B,C,G,H	OXY USA INC	PO BOX 4294 HOUSTON, TX 77210
15/23S/33E 22/23S/33E 21/23S/33E 20/23S/33E 28/23S/33E 27/23S/33E	M D,E,L,M A,B,G,H,I,J,O,P C,D,E,F,K,L,M A,B,C,D,E,F,G,H D	DEVON ENERGY PRODUCTION COMPANY, LP	20 N BROADWAY OKLAHOMA CITY, OK 73102
17/23S/33E 16/23S/33E 21/23S/33E 20/23S/33E	H,I,J,O,P L F A,B,G,H,I,J,O,P	COG OPERATING LLC	ONE CONCHO CENTER 600 W. ILLINOIS AVE MIDLAND, TX 79701
		COG PRODUCTION LLC	PO BOX 2064 MIDLAND, TX 79702
16/23S/33E	E,F,I,J,K,L,M,N,O ,P	COG PRODUCTION LLC	550 W TEXAS MIDLAND, TX 79701
		OTHER PARTIES	MAILING ADDRESS
N/A		BUREAU OF LAND MANAGEMENT	310 DINOSAUR TRAIL SANTA FE, NM 87502

Notices were sent on 10/17/2018 and 10/29/2018 for the Spackler SWD #1 application by mailing them a copy of the Form C-108. Proof of receipt of notice will be submitted to the OCD under separate cover.

Sincerely,

Ramona K. Hovey
Sr. Petroleum Engineer / Lonquist & Co., LLC
For OWL SWD Operating, LLC

U.S. Postal Service™
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Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ 1793

Sent To Bureau of Land Mgmt Owl
 Street and Apt. No., or PO Box No. 310 Dinosaur Trail
 City, State, ZIP+4® Santa Fe, NM 87502

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

**Bureau of Land Management
 310 Dinosaur Trail
 Santa Fe, New Mexico 87502**

2. Article Number (Transfer from service label)
 7016 0600 0000 2971 0717

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X
 Agent
 Addressee

B. Received by (Printed Name) _____ C. Date of Delivery _____

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

1793 Spackler SWD#1 Owl

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

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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 \$ 1793

Sent To COG operating LLC Owl
 Street and Apt. No., or PO Box No. 550 W Texas
 City, State, ZIP+4® Midland, Texas 79701

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

**COG Operating, LLC
 550 W Texas
 Midland, Texas 79701**

2. Article Number (Transfer from service label)
 7016 0600 0000 2971 0724

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X
 Agent
 Addressee

B. Received by (Printed Name) _____ C. Date of Delivery _____

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 Signature Confirmation Restricted Delivery

1793 Spackler SWD#1 Owl

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

PLACE STICKER AT TOP OF MAIL (ONE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE)
CERTIFIED MAIL



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7016 0600 0000 2971 0731

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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 _____

Postmark Here

1793
Spadden Sub #1
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Eddy

COG Operating, LLC
One Concho Center
600 W. Illinois Avenue
Midland, Texas 79701

PS Form 3810, April 2015 PSN 7530-02-000-9053 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 Addressment to

COG Operating, LLC
One Concho Center
600 W. Illinois Avenue
Midland, Texas 79701



9590 9402 3572 7305 4564 65

2. Article Number (Transfer from service label)
7016 0600 0000 2971 0731

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) C. Date of Delivery

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

1793 Spadden Sub #1 Ouel

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input 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

all Restricted Delivery

PLACE STICKER AT TOP OF MAIL (ONE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE)
CERTIFIED MAIL



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7016 0600 0000 2971 0746

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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 _____

Postmark Here

1793
Spadden Sub #1
Ouel
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Eddy

COG Production, LLC
P. O. Box 2064
Midland, Texas 79702

PS Form 3800, April 2015 PSN 7530-02-000-9053 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.

COG Production, LLC
P. O. Box 2064
Midland, Texas 79702



9590 9402 3572 7305 4564 72

2. Article Number (Transfer from service label)
7016 0600 0000 2971 0746

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) C. Date of Delivery

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

1793 Spadden Sub #1 Ouel

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input 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

all Restricted Delivery

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS TO RECEIVE LIGHT CERTIFIED MAIL



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7016 0600 0000 2971 0755

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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 \$ _____

Postmark Here

1793
Spackler SW #1
Ouf
New
Lea
Edley

Conoco Phillips Company
P. O. Box 7500
Bartlesville, Oklahoma 74005

PS Form 3800, April 2015 PSN 7530-02-000-9055 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.

Conoco Phillips Company
P. O. Box 7500
Bartlesville, Oklahoma 74005



9590 9402 3572 7305 4564 96

2. Article Number (Transfer from service label)

7016 0600 0000 2971 0755

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) C. Date of Delivery

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

1793 Spackler SW #1 Ouf

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

Restricted Delivery

Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS TO RECEIVE LIGHT CERTIFIED MAIL



7016 0600 0000 2971 0762
7016 0600 0000 2971 0762

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 \$ _____

Postmark Here

1793
Spackler SW #1
Ouf
Lea
Edley

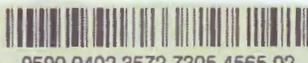
Sent To Devon Energy Production Co
Street and Apt. No. or PO Box No. 20 N Broadway
City, State ZIP+4® Oklahoma City, OK 73102

PS Form 3800, April 2015 PSN 7530-02-000-9055 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.

Devon Energy Production Co., LP
20 North Broadway
Oklahoma City, OK 73102



9590 9402 3572 7305 4565 02

2. Article Number (Transfer from service label)

7016 0600 0000 2971 0762

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) C. Date of Delivery

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

1793 Spackler SW #1 Ouf

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

Restricted Delivery

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

CERTIFIED MAIL



7016 0600 0000 2971 0779
7016 0600 0000 2971 0779

U.S. Postal Service™
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 \$ _____

Postmark Here

Postage \$ _____

Hughes Properties, LLC
 P. O. Box 5097
 Carlsbad, New Mexico 88221

1793 Spackler SWD #1
 and
 her
 Edly

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:

Hughes Properties, LLC
 P. O. Box 5097
 Carlsbad, New Mexico 88221

2. Article Number (Transfer from service label)

7016 0600 0000 2971 0779

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

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

1793 Spackler SWD #1 and

3. Service Type

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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

all Restricted Delivery

Domestic Return Receipt



U.S. Postal Service™
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 \$ _____

Postmark Here

Postage \$ _____

OXY USA, Inc.
 P. O. Box 4294
 Houston, Texas 77210

1793 Spackler SWD #1
 and
 her
 Edly

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:

OXY USA, Inc.
 P. O. Box 4294
 Houston, Texas 77210

2. Article Number (Transfer from service label)

7016 0600 0000 2971 0786

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

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

1793 Spackler SWD #1

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

all Restricted Delivery

Domestic Return Receipt



Shipment Receipt

Address Information

Ship to:
BUREAU OF LAND MGMT

301 DINOSAUR TRAIL

SANTA FE, NM
87508
US
5059542000

Ship from:
Steve Pattee

1001 MCKINNEY ST
STE 1650
HOUSTON, TX
770026423
US
7135599956

Shipment Information:

Tracking no.: 773587066736
Ship date: 10/29/2018
Estimated shipping charges: 13.91 USD

Package Information

Pricing option: FedEx Standard Rate
Service type: FedEx Ground
Package type: Your Packaging
Number of packages: 1
Total weight: 2 LBS
Declared Value: 0.00 USD
Special Services: Direct signature required
Pickup/Drop-off: Use an already scheduled pickup at my location

Billing Information:

Bill transportation to: MyAccount-089

Your reference *1645, 1646, 1792, 1793 - LEGAL NOTICES, RESEND*

P.O. no.:

Invoice no.:

Department no.:

Thank you for shipping online with FedEx ShipManager at fedex.com.

Please Note

FedEx will not be responsible for any claim in excess of \$100 per package, whether the result of loss, damage, delay, non-delivery, misdelivery, or misinformation, unless you declare a higher value, pay an additional charge, document your actual loss and file a timely claim. Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for any loss, including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental, consequential, or special is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value is \$1000, e.g., jewelry, precious metals, negotiable instruments and other items listed in our Service Guide. Written claims must be filed within strict time limits; Consult the applicable FedEx Service Guide for details. The estimated shipping charge may be different than the actual charges for your shipment. Differences may occur based on actual weight, dimensions, and other factors. Consult the applicable [FedEx Service Guide](#) or the FedEx Rate Sheets for details on how shipping charges are calculated.

LONQUIST & CO. LLC

AUSTIN
HOUSTON

PETROLEUM
ENGINEERS

ENERGY
ADVISORS

WICHITA
CALGARY

www.lonquist.com

October 10, 2018

BUREAU OF LAND MANAGEMENT
310 DINOSAUR TRAIL
SANTA FE, NM 87502

Subject: Spackler SWD No. 1 Authorization to Inject

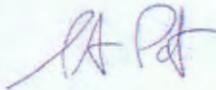
To Whom It May Concern:

Attached for your review is Form C-108, Application for Authorization to Inject, and its supplemental documents prepared for OWL SWD Operating, LLC's Spackler SWD No. 1 well. Section XIV of Form C-108 requires that the surface land owner on which the well is located and each leasehold operator within a one-half mile radius of the proposed well location be furnished with the application.

According to the New Mexico Oil Conservation Division, surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date in which this application was mailed to them.

Any questions should be directed towards OWL SWD Operating, LLC's agent, Lonquist & Co., LLC.

Regards,



Stephen L. Pattee, P.G.
Regulatory Manager
Lonquist & Co., LLC

(512) 600-1774
steve@lonquist.com

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October 10, 2018

COG OPERATING LLC
550 W TEXAS
MIDLAND, TX 79701

Subject: Spackler SWD No. 1 Authorization to Inject

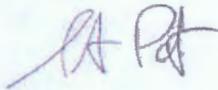
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October 10, 2018

COG OPERATING LLC
ONE CONCHO CENTER
600 W. ILLINOIS AVE
MIDLAND, TX 79701

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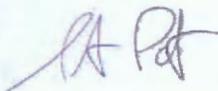
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October 10, 2018

COG PRODUCTION LLC
PO BOX 2064
MIDLAND, TX 79702

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October 10, 2018

CONOCOPHILLIPS CO
PO BOX 7500
BARTLESVILLE, OK 74005

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October 10, 2018

DEVON ENERGY PRODUCTION COMPANY, LP
20 N BROADWAY
OKLAHOMA CITY, OK 73102

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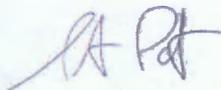
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October 10, 2018

HUGHES PROPERTIES LLC
PO BOX 5097
CARLSBAD, NM 88221

Subject: Spackler SWD No. 1 Authorization to Inject

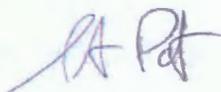
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October 10, 2018

OXY USA INC
PO BOX 4294
HOUSTON, TX 77210

Subject: Spackler SWD No. 1 Authorization to Inject

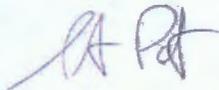
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Regards,



Stephen L. Pattee, P.G.
Regulatory Manager
Lonquist & Co., LLC

(512) 600-1774
steve@lonquist.com

APPLICATION FOR AUTHORIZATION TO INJECT

- I. PURPOSE: _____ Secondary Recovery _____ Pressure Maintenance _____ Disposal _____ Storage
Application qualifies for administrative approval? _____ Yes _____ No
- II. OPERATOR: OWL SWD Operating, LLC
ADDRESS: 8214 Westchester Drive, Suite 850, Dallas, TX 75255
CONTACT PARTY: Preston Carr PHONE: (855) 695-7937
- 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: Ramona Hovey TITLE: Consulting Engineer – Agent for OWL SWD Operating, LLC
SIGNATURE: Ramona Hovey DATE: 10/11/2018
E-MAIL ADDRESS: ramona@lonquist.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: _____

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.

INJECTION WELL DATA SHEET

OPERATOR: OWL SWD Operating, LLC (OGRID 308339)

WELL NAME & NUMBER: Spackler SWD No. 1

WELL LOCATION: 2,484' FNL & 1,181' FWL
FOOTAGE LOCATION

E
UNIT LETTER

21
SECTION

23 S
TOWNSHIP

33 E
RANGE

WELLBORE SCHEMATIC

WELL CONSTRUCTION DATA

Surface Casing

Hole Size: 26"

Casing Size: 20"

Cemented with: 3,700 sks

or _____ ft³

Top of Cement: surface

Method Determined: circulation

Intermediate Casing 1

Hole Size: 17-1/2"

Casing Size: 13-5/8"

Cemented with: 3,690 sks

or _____ ft³

Top of Cement: surface

Method Determined: circulation

Intermediate Casing 2

Hole Size: 12-1/4"

Casing Size: 9-5/8"

Cemented with: 3,140 sks

or _____ ft³

Top of Cement: surface

Method Determined: circulation

Production Liner

Hole Size: 8-1/2"

Casing Size: 7-5/8"

Cemented with: 300 sks

or _____ ft³

Top of Cement: 13,900'

Method Determined: Calculation

Total Depth: 18,600'

Injection Interval

17,060 feet to 18,600 feet

(Open Hole)

INJECTION WELL DATA SHEET

Tubing Size: 5.500", 20.0 lb/ft, P-110 BTC and UFJ (or equivalent), from 0' – 17,010'

Lining Material: Duoline

Type of Packer: 7-5/8" x 5.5" D&L Oil Tools Permapack Packer – Single Bore

Packer Setting Depth: 17,010'

Other Type of Tubing/Casing Seal (if applicable): _____

Additional Data

1. Is this a new well drilled for injection? X Yes _____ No

If no, for what purpose was the well originally drilled?

2. Name of the Injection Formation: Silurian-Devonian

3. Name of Field or Pool (if applicable): _____

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.

No, new drill.

5. Give the name and depths of any oil or gas zones underlying or overlying the proposed injection zone in this area:

Formation	Depth
Delaware	5,186'
Cherry Canyon	6,126'
Bone Spring	9,061'
Wolfcamp	12,266'
Strawn	14,038'
Atoka	14,243'
Morrow	15,241'
Devonian	17,061'

OWL SWD Operating, LLC.

Spackler SWD No. 1

FORM C-108 Supplemental Information

III. Well Data

A. Wellbore Information

1.

Well information	
Lease Name	Spackler SWD
Well No.	1
Location	Unit E S-21 T-23S R-33E
Footage Location	2,484' FNL & 1,181' FWL

2.

a. Wellbore Description

Casing Information				
Type	Surface	Intermediate 1	Intermediate 2	Production Liner
OD	20"	13-5/8"	9-5/8"	7-5/8"
WT	0.635"	0.625"	0.545"	0.562"
ID	18.730"	12.375"	8.535"	6.501"
Drift ID	18.542"		8.379"	6.376"
COD	21.000"		10.625"	7.625"
Weight	133 lb/ft	88.2 lb/ft	53.5 lb/ft	42.8 lb/ft
Grade	J-55 STC	HCP-110 STC (Or Equivalent)	HCQ-125 (Or Equivalent)	P-110 UFJ (Or Equivalent)
Hole Size	26"	17-1/2"	12-1/4"	8-1/2"
Depth Set	1,880'	5,235'	14,100'	13,900' – 17,060'

b. Cementing Program

Cement Information				
Casing String	Surface	Intermediate 1	Production	Production Liner
Lead Cement	HALCEM	HALCEM	Stage 1: NEOCEM Stage 2: NEOCEM	
Lead Cement Volume	2,680 sks	3,145 sks	Stage 1: 1630 sks Stage 2: 785 sks	
Tail Cement	HALCEM	HALCEM	Stage 1: NEOCEM Stage 2: HALCEM	VERSACEM
Tail Cement Volume	1,020 sks	545 sks	Stage 1: 625 sks Stage 2: 100 sks	300 sks
Cement Excess	100%	100%	100%	50%
TOC	Surface	Surface	Surface	13,900'
Method	Circulate to Surface	Circulate to Surface	Circulate to Surface	Calculation

3. Tubing Description

Tubing		
OD	5-1/2"	5-1/2"
WT	0.361"	0.361"
ID	4.778"	4.778"
Drift ID	4.653"	4.653"
COD	6.050"	5.500"
Weight	20 lb/ft	20 lb/ft
Grade	P-110 BTC (Or Equivalent)	P-110 UFJ (Or Equivalent)
Depth Set	13,800'	13,800'-17,010'

Tubing will be lined with Duoline.

4. Packer Description

D&L Oil Tools 7-5/8" x 5-1/2" Permapack Packer – Single Bore

B. Completion Information

1. Injection Formation: Silurian - Devonian
2. Gross Injection Interval: 17,060' – 18,600'

Completion Type: Open Hole

3. Drilled for injection.
4. See the attached wellbore schematic.
5. Oil and Gas Bearing Zones within area of well:

Formation	Depth
Delaware	5,186'
Cherry Canyon	6,126'
Bone Spring	9,061'
Wolfcamp	12,266'
Strawn	14,038'
Atoka	14,243'
Morrow	15,241'
Devonian	17,061'

VI. Area of Review

No wells within the one-mile AOR penetrated the proposed injection zone.

VII. Proposed Operation Data

1. Proposed Daily Rate of Fluids to be Injection:

Average Volume: 20,000 BPD
Maximum Volume: 30,000 BPD

2. Closed System

3. Anticipated Injection Pressure:

Average Injection Pressure: 2,559 PSI (surface pressure)
Maximum Injection Pressure: 3,412 PSI (surface pressure)

4. The injection fluid is to be locally produced water. Attached are produced water sample analyses taken from the closest wells that feature samples from the Bone Springs and Delaware formations.

5. The Devonian Formation is productive of oil and gas in this area.

VIII. Geological Data

The Devonian formation is a dolomitic ramp carbonate that occurs below the Woodford shale and above the Fusselman formation. Strata found in the Devonian formation near Jal are two major groups, the Wristen Buildups and the Thirtyone Deepwater Chert, with the Wristen being more abundant. The Wristen Groups is composed of mixed limestone and dolomites with mudstone to grainstone and boundstone textures. Porosity in the Wristen group is a result of both primary and secondary development. Present are moldic, vugular, karstic (including collapse breccia) features that allow for higher porosities and permeabilities. The Thirtyone Formation contains two end-member reservoir facies, skeletal packstones/grainstones and spiculitic chert, with most of the porosity and permeability found in the coarsely crystalline cherty dolomite. These particular characteristics allow for this formation to be a successful Salt Water Disposal horizon.

A. Injection Zone: Devonian-Silurian Formation

Formation	Depth
Rustler	1,326'
Salado	1,828'
Delaware	5,186'
Cherry Canyon	6,126'
Bone Spring	9,061'
Wolfcamp	12,266'
Strawn	14,038'
Atoka	14,243'
Morrow	15,241'
Mississippian Lime	16,451'
Woodford	16,876'
Devonian	17,061'
Fusselman	18,011'
Montoya	18,548'

B. Underground Sources of Drinking Water

Water wells in the one-mile surrounding area for the proposed Spackler SWD No.1 well are at depths ranging from 550 ft to 650 ft. The Rustler may also be another USDW and will be protected through the top of the Salado Formation at 1,828' by setting surface casing at 1,880'.

IX. Proposed Stimulation Program

No proposed stimulation program.

X. Logging and Test Data on the Well

There are no existing logs or test data on the well. During the process of drilling and completion resistivity, gamma ray, and density logs will be run.

XI. Chemical Analysis of Fresh Water Wells

There are three (3) fresh water wells within one mile of the well location, per the New Mexico Office of the State Engineer. A list of all the water wells, a map of these wells and their associated Water Right Summaries are attached. Fresh water samples will be obtained from two of the wells and analysis of these samples will be submitted as soon as possible.

XII. Affirmative Statement of Examination of Geologic and Engineering Data

Based on the available engineering and geologic data we find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water.



November 1, 2018

Dear Customer:

Proof-of-delivery letters are being provided for the following shipments:

773587066736

Santa Fe, NM

773586845413

Midland, TX

You may save or print this Batch Signature Proof of Delivery file for your records.

Thank you for choosing FedEx.

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1.800.GoFedEx 1.800.463.3339



November 1, 2018

Dear Customer:

The following is the proof-of-delivery for tracking number **773587066736**.

Delivery Information:

Status:	Delivered	Delivery location:	Santa Fe, NM
Signed for by:	ADURAN	Delivery date:	Nov 1, 2018 10:05
Service type:	FedEx Ground		
Special Handling:	Direct Signature Required		

Signature image is available. In order to view image and detailed information, the shipper or payor account number of the shipment must be provided.

Shipping Information:

Tracking number:	773587066736	Ship date:	Oct 29, 2018
		Weight:	2.0 lbs/0.9 kg

Recipient:
SANTA FE, NM US

Shipper:
HOUSTON, TX US

Reference

1645-Cedar Canyon#1 Legal Noti

Thank you for choosing FedEx.



November 1, 2018

Dear Customer:

The following is the proof-of-delivery for tracking number **773586845413**.

Delivery Information:

Status:	Delivered	Delivery location:	Midland, TX
Signed for by:	MARANDA	Delivery date:	Oct 31, 2018 15:31
Service type:	FedEx Ground		
Special Handling:	Direct Signature Required		

Signature image is available. In order to view image and detailed information, the shipper or payor account number of the shipment must be provided.

Shipping Information:

Tracking number:	773586845413	Ship date:	Oct 29, 2018
		Weight:	1.0 lbs/0.5 kg

Recipient:
MIDLAND, TX US

Shipper:
HOUSTON, TX US

Reference

1646-COTTON #1-Resend

Thank you for choosing FedEx.



Track Another Package +

Tracking Number: 7016060000029710779

Remove X

Expected Delivery on

MONDAY

22 OCTOBER 2018

See Product Information v

Delivered

October 22, 2018 at 9:26 am
Delivered, Left with Individual
CARLSBAD, NM 88220

Get Updates v

Text & Email Updates v

Tracking History v

Product Information v

See Less ^

Tracking Number: 7016060000029710724

Remove X

Your item was delivered to an individual at the address at 2:27 pm on October 19, 2018 in MIDLAND, TX 79701.

Delivered

October 19, 2018 at 2:27 pm
Delivered, Left with Individual
MIDLAND, TX 79701

Get Updates v

See More v

Tracking Number: 7016060000029710755

Remove X

Expected Delivery on

MONDAY

22 OCTOBER 2018

See Product Information v

Delivered

October 22, 2018 at 7:36 am
Delivered
BARTLESVILLE, OK 74003

Get Updates v

See More v

Tracking Number: 7016060000029710786

Remove X

Your item has been delivered to an agent at 4:13 am on October 23, 2018 in HOUSTON, TX 77210.

Feedback

 **Delivered**

October 23, 2018 at 4:13 am
Delivered, To Agent
HOUSTON, TX 77210

Get Updates 

See More 

Tracking Number: 70160600000029710762

Remove X

Expected Delivery on

MONDAY

22 OCTOBER
2018 

See Product Information 

 **Delivered**

October 22, 2018 at 9:00 am
Delivered
OKLAHOMA CITY, OK 73102

Get Updates 

See More 

Tracking Number: 70160600000029710731

Remove X

Your item was delivered to an individual at the address at 2:27 pm on October 19, 2018 in MIDLAND, TX 79701.

 **Delivered**

October 19, 2018 at 2:27 pm
Delivered, Left with Individual
MIDLAND, TX 79701

Get Updates 

See More 

Feedback

Can't find what you're looking for?

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*NOTE: Black and white (grayscale) images show the outside, front of letter-sized envelopes and mailpieces that are processed through USPS automated equipment.

Feedback

**Spackler SWD No. 1
1 Mile Area of Review List**

API (30-025-...)	WELL NAME	WELL TYPE	STATUS	OPERATOR	TVD (FT.)	LATITUDE (NAD83 DD)	LONGITUDE (NAD83 DD)	DATE DRILLED
20424	PRE-ONGARD WELL #001	O	P	PRE-ONGARD WELL OPERATOR	5344	32.2847900000	-103.587936400	1/1/1900
24893	BRINNINSTOOL UNIT #001	G	P	COG OPERATING LLC	15950	32.2920418000	-103.592216500	12/31/1974
25518	BEBIDAS 16 STATE SWD #001	S	A	COG OPERATING LLC	15950	32.3029213000	-103.583679200	5/8/1977
25553	BRINNINSTOOL UNIT #002	G	A	COG OPERATING LLC	15800	32.2920380000	-103.579399100	5/31/1977
28005	PRE-ONGARD WELL #004	O	C	PRE-ONGARD WELL OPERATOR	0	32.2884160102	-103.575186747	12/31/9999
33424	THISTLE UNIT #002	O	P	C W TRAINER	15850	32.2775269000	-103.583656300	5/27/1996
34076	THISTLE UNIT #003	O	C	DEVON SFS OPERATING INC	0	32.2920416394	-103.575192461	12/31/9999
40010	THISTLE UNIT #018H	O	A	DEVON ENERGY PRODUCTION COMPANY, LP	8942	32.28255840000	-103.58103940000	9/5/2011
40015	THISTLE UNIT #020H	O	H	DEVON ENERGY PRODUCTION COMPANY, LP	9061	32.2825584000	-103.568252600	4/2/2011
40057	THISTLE UNIT #019C	O	C	DEVON ENERGY PRODUCTION COMPANY, LP	0	32.2825584000	-103.576797500	12/31/9999
40136	THISTLE UNIT #025C	O	C	DEVON ENERGY PRODUCTION COMPANY, LP	0	32.2970695000	-103.572547900	12/31/9999
40854	BEBIDAS STATE #001H	O	A	COG PRODUCTION, LLC	11068	32.2985611000	-103.584579500	9/27/2014
40855	BEBIDAS STATE #002H	O	A	COG PRODUCTION, LLC	11175	32.2985573000	-103.579704300	9/1/2013
40856	BEBIDAS STATE #003H	O	A	COG PRODUCTION, LLC	10827	32.2985573000	-103.574874900	9/5/2014
40857	BEBIDAS STATE #004H	O	A	COG PRODUCTION, LLC	11202	32.2985497000	-103.569992100	7/28/2013
41147	THISTLE UNIT #030H	O	A	DEVON ENERGY PRODUCTION COMPANY, LP	9684	32.2821999000	-103.584564200	12/21/2015
41329	JAZZMASTER 17 STATE #004H	O	A	COG OPERATING LLC	11081	32.31108090000	-103.58795930000	9/8/2013
41371	BRINNINSTOOL UNIT #003H	O	A	COG OPERATING LLC	11044	32.28388980000	-103.59310910000	11/3/2013
41426	JAZZMASTER 17 STATE #003H	O	A	COG OPERATING LLC	10973	32.3110886000	-103.592231800	4/30/2014
41487	THISTLE UNIT #061H	O	A	DEVON ENERGY PRODUCTION COMPANY, LP	11122	32.2835197000	-103.566604600	2/23/2014
41794	THISTLE UNIT #053H	O	A	DEVON ENERGY PRODUCTION COMPANY, LP	11211	32.28242110000	-103.57530980000	9/10/2014
41795	THISTLE UNIT #054H	O	A	DEVON ENERGY PRODUCTION COMPANY, LP	0	32.2824211000	-103.572296100	7/31/2015
41796	THISTLE UNIT #059H	O	A	DEVON ENERGY PRODUCTION COMPANY, LP	11164	32.2824211000	-103.575149500	8/13/2014
41797	THISTLE UNIT #060H	O	A	DEVON ENERGY PRODUCTION COMPANY, LP	11083	32.2824211000	-103.572135900	8/24/2015
41803	BRINNINSTOOL UNIT #004H	O	A	COG OPERATING LLC	11027	32.2838821000	-103.588233900	12/15/2014
41819	BRINNINSTOOL UNIT #006C	O	C	COG OPERATING LLC	0	32.2836838000	-103.578483600	12/31/9999
41850	FOXGLOVE 29 FEDERAL #006H	O	A	OXY USA INC	11150	32.2820473000	-103.591171300	12/11/2014
41851	FOXGLOVE 29 FEDERAL #007H	O	A	OXY USA INC	11159	32.2820396000	-103.587936400	10/16/2014
41860	BRINNINSTOOL UNIT #005C	O	C	COG OPERATING LLC	0	32.2965698000	-103.583374000	12/31/9999
41896	THISTLE UNIT #051H	O	A	DEVON ENERGY PRODUCTION COMPANY, LP	11189	32.2824211000	-103.584404000	9/13/2014
41897	THISTLE UNIT #052H	O	A	DEVON ENERGY PRODUCTION COMPANY, LP	11229	32.2824745000	-103.579986600	10/17/2014
41913	HORNED VIPER 20 FEDERAL COM #001H	O	A	DEVON ENERGY PRODUCTION COMPANY, LP	11042	32.2835426000	-103.598518400	2/1/2015
42431	THISTLE #026H	O	N	DEVON ENERGY PRODUCTION COMPANY, LP	8981	32.2832225800	-103.566623430	5/29/2015
42679	THISTLE UNIT #094H	O	A	DEVON ENERGY PRODUCTION COMPANY, LP	10638	32.2974757000	-103.568759200	9/8/2015
42680	THISTLE UNIT #109H	O	A	DEVON ENERGY PRODUCTION COMPANY, LP	10101	32.2967870000	-103.567626800	10/24/2015
42681	THISTLE UNIT #124H	O	A	DEVON ENERGY PRODUCTION COMPANY, LP	9777	32.2957870000	-103.567464900	11/20/2015
43380	THISTLE UNIT #077H	O	N	DEVON ENERGY PRODUCTION COMPANY, LP	0	32.2967656000	-103.516120100	12/31/9999
43381	THISTLE UNIT #107H	O	N	DEVON ENERGY PRODUCTION COMPANY, LP	0	32.2967658000	-103.576281900	12/31/9999
43382	THISTLE UNIT #122H	O	N	DEVON ENERGY PRODUCTION COMPANY, LP	0	32.2967658000	-103.576443700	12/31/9999
43588	THISTLE UNIT #152H	O	N	DEVON ENERGY PRODUCTION COMPANY, LP	0	32.2548475000	-103.581824400	12/31/9999
43589	THISTLE UNIT #153H	O	N	DEVON ENERGY PRODUCTION COMPANY, LP	0	32.2549296000	-103.581662800	12/31/9999
43598	THISTLE UNIT #154H	O	N	DEVON ENERGY PRODUCTION COMPANY, LP	0	32.2820599000	-103.578241600	12/31/9999
43709	THISTLE UNIT #105H	O	N	DEVON ENERGY PRODUCTION COMPANY, LP	0	32.2966116000	-103.571509500	12/31/9999
43710	THISTLE UNIT #119H	O	N	DEVON ENERGY PRODUCTION COMPANY, LP	0	32.2966939000	-103.571347800	12/31/9999
43727	THISTLE UNIT #108H	O	N	DEVON ENERGY PRODUCTION COMPANY, LP	0	32.29661150000	-103.57134770000	12/31/9999
43728	THISTLE UNIT #157H	O	N	DEVON ENERGY PRODUCTION COMPANY, LP	0	32.25484720000	-103.58166270000	12/31/9999

Spackler SWD No. 1
Water Wells within 1 Mile
Oilfield Water Logistics
Lea County, NM

PCS: NAD 1983 SPCS NM-E FIPS 3001 (US Ft.)

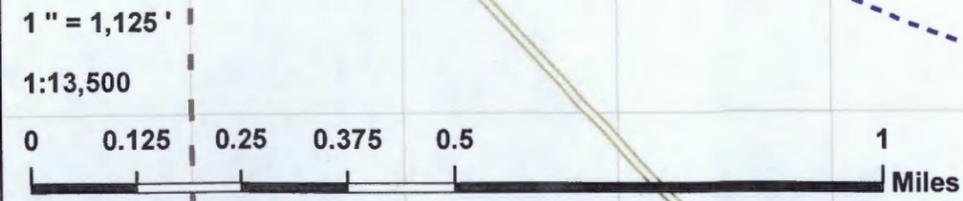
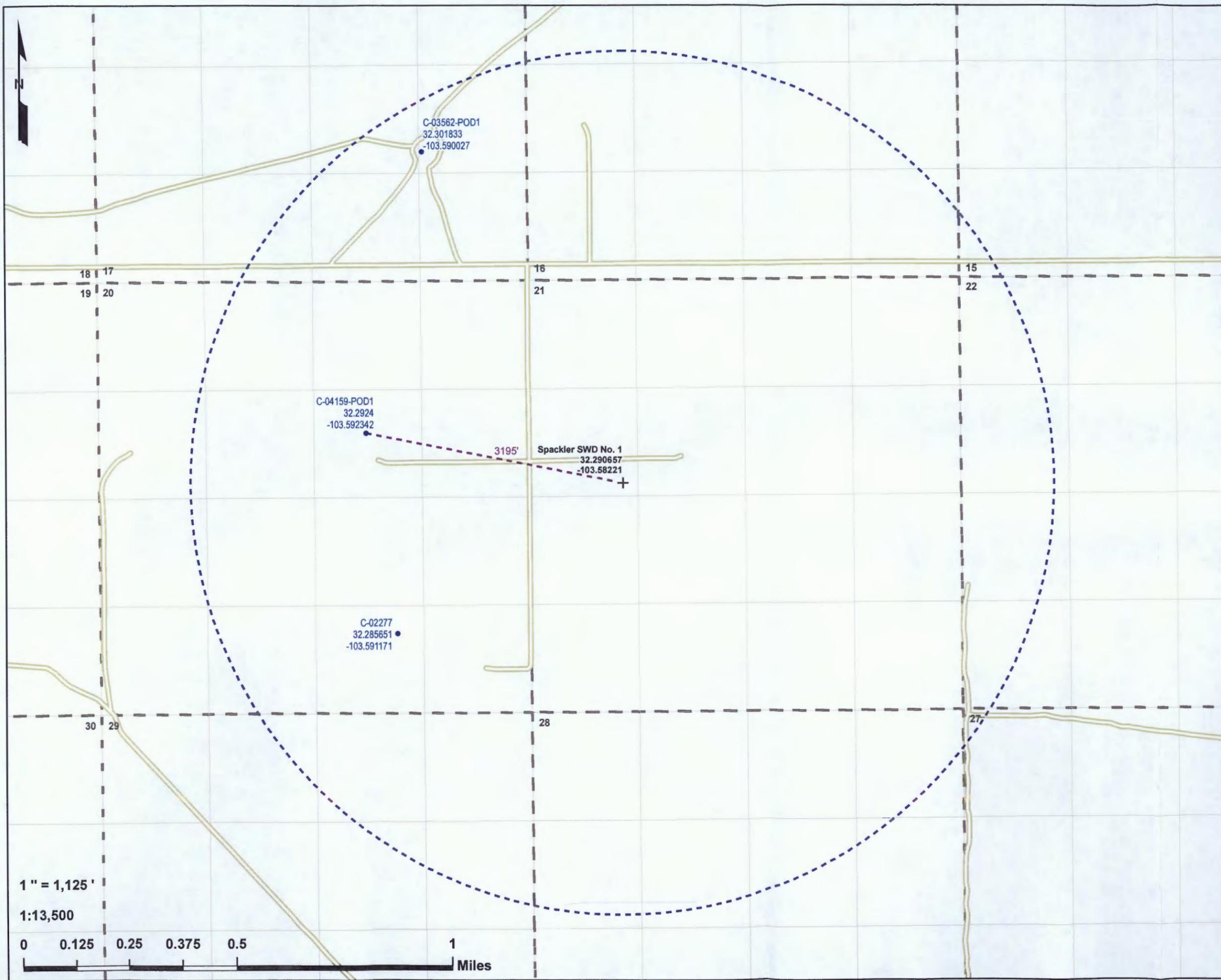
Drawn by: SJL | Date: 10/8/2018 | Approved by: ELR

LONQUIST & CO. LLC

PETROLEUM ENGINEERS | **ENERGY ADVISORS**

AUSTIN · HOUSTON · WICHITA · DENVER · CALGARY

-  Spackler SWD No. 1
-  Water Well (3) [NM-OSE 2018]
-  1 Mile Radius
-  Distance Call
-  QQ-Section (NM-PLSS 2nd Div.)
-  Section (NM-PLSS 1st Div.)
-  Township/Range (NM-PLSS)



Spackler SWD No. 1
Water Wells Within 1 Mile

POD BASIN	POD #	T	R	S	WELL DEPTH	WATER DEPTH	WELL USE	POD STATUS	USE	OWNER LAST NAME	ADDRESS	CITY	ST	ZIP	LAT	LONG	EASTING	NORTHING	DATUM
C	02277	23S	33E	20	550	400		PMT	COM	BRININSTOOL XL RANCH LLC	1523 BUTLER RD	SAN ANGELO	TX	76904	32.28565135910	-103.59117100000	632663.0	3572970.0	NAD83
C	04159	23S	33E	20	0	0		PMT	EXP	HUGHES PROPERTIES LLC	910 W PIERCE ST #138	CARLSBAD	NM	88220	32.29239982200	-103.59234202000	632542.9	3573716.7	NAD83
C	03562	23S	33E	17	0	0		PMT	STK	LIMESTONE LIVESTOCK, LLC	P.O. BOX 190	LOVINGTON	NM	88260	32.30183348410	-103.59002746200	632747.1	3574765.4	NAD83

Spackler SWD No. 1
1 Mile Offset Operators
Oilfield Water Logistics
Lea County, NM

PCS: NAD 1983 SPCS NM-E FIPS 3001 (US Ft.)

Drawn by: SJL | Date: 10/8/2018 | Approved by: ELR

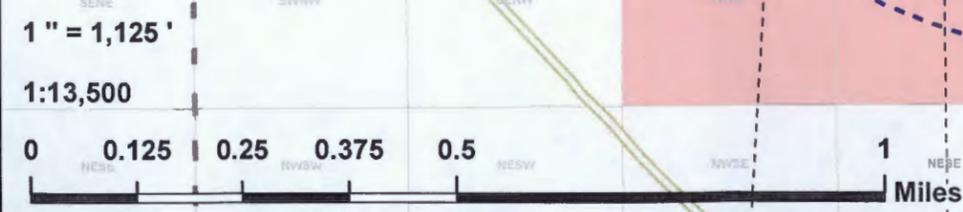
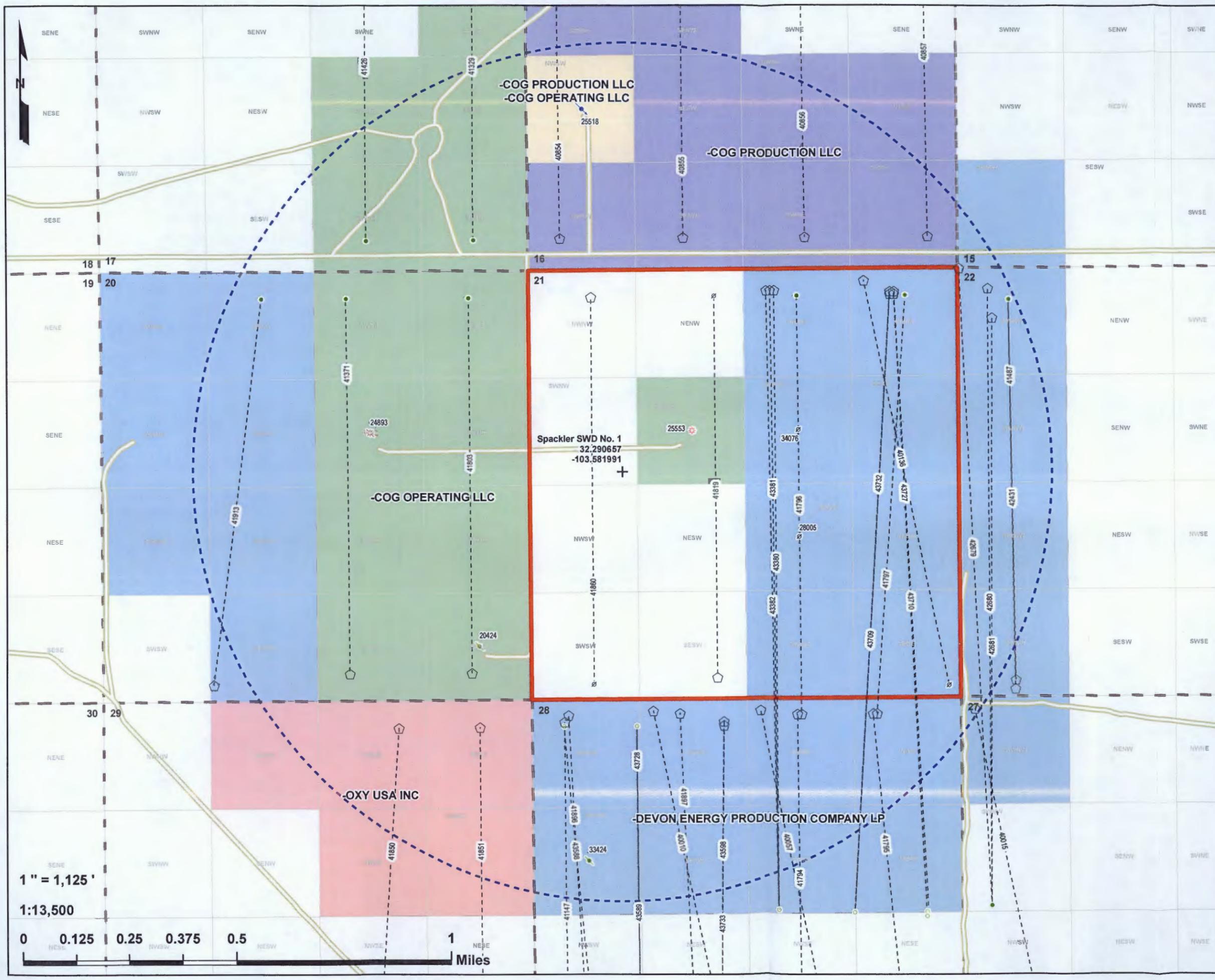
LONQUIST & CO. LLC

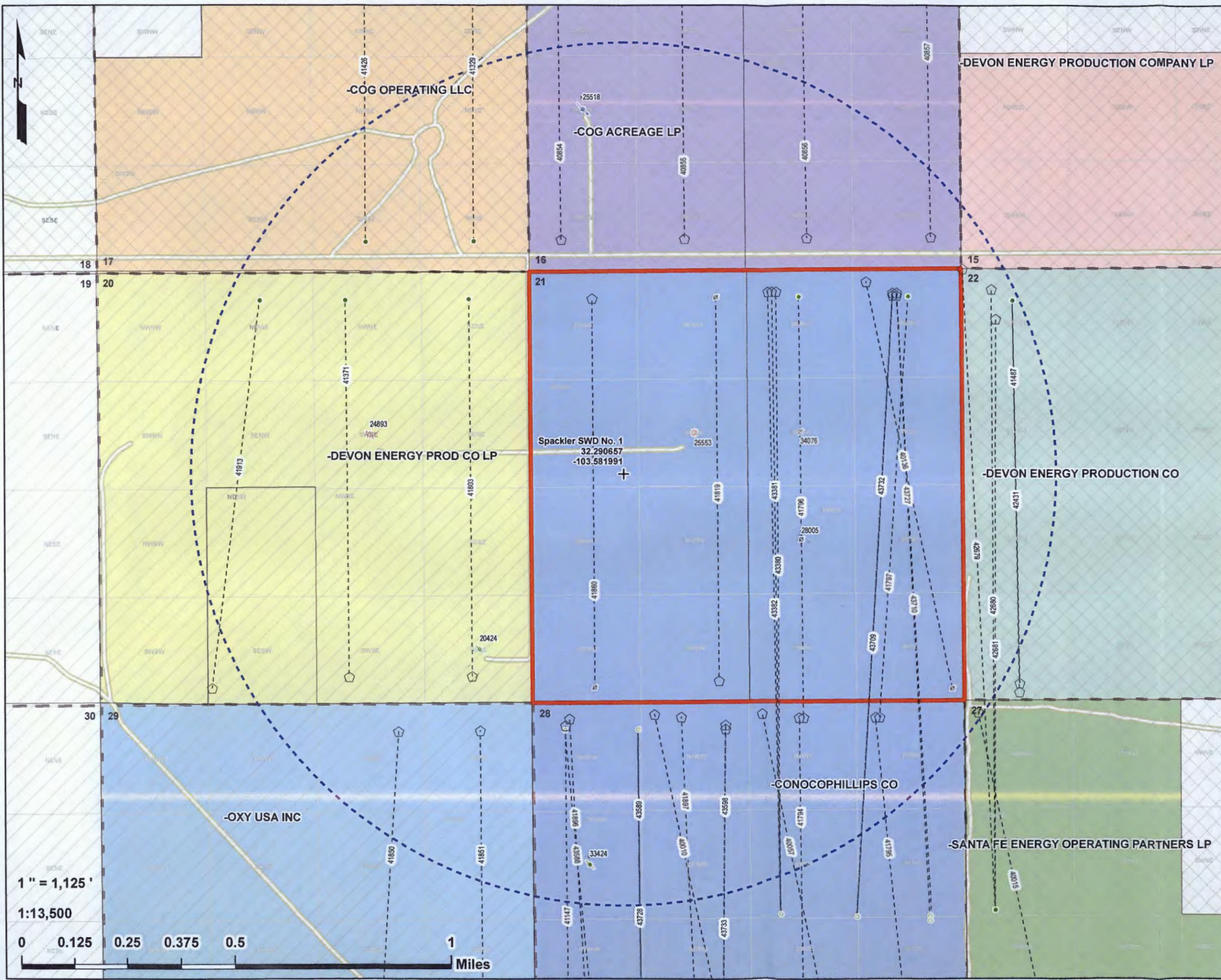
PETROLEUM ENGINEERS | **ENERGY ADVISORS**

AUSTIN - HOUSTON - WICHITA - DENVER - CALGARY

- + Spackler SWD No. 1
- 1 Mile Radius
- QQ-Section (NM-PLSS 2nd Div.)
- ▬ Section (NM-PLSS 1st Div.)
- ▬ Township/Range (NM-PLSS)
- ▭ Surface Owner Property Boundary (HUGHES PROPERTIES LLC)
- - - Laterals
- API (30-025-...) SHL Status - Type (Count)**
 - Horizontal Surface Location (41)
 - ⊕ Active - Gas (1)
 - ⊖ Active - Salt Water Disposal (1)
 - ⊗ Canceled Location (2)
 - ⊙ Plugged (Site Released) - Oil (2)
 - ⊙ Plugged (Site Released) - Gas (1)
- API (30-025-...) BHL Status - Type (Count)**
 - Active - Oil (23)
 - Permitted - Oil (13)
 - ⊗ Canceled Location (4)
 - ⊙ Plugged (Not Released) - Oil (1)
- Operators**
 - -COG OPERATING LLC
 - -COG PRODUCTION LLC
 - -COG PRODUCTION LLC; -COG OPERATING LLC
 - -DEVON ENERGY PRODUCTION COMPANY LP
 - -OXY USA INC

Source: Well SHL/BHL/Directional Data - NM-OCD/DrillingInfo (2018)





Spackler SWD No. 1
1 Mile Offset Lessees
Oilfield Water Logistics
Lea County, NM

PCS: NAD 1983 SPCS NM-E FIPS 3001 (US Ft.)
 Drawn by: SJL | Date: 10/8/2018 | Approved by: ELR

LONQUIST & CO. LLC

PETROLEUM ENGINEERS | **ENERGY ADVISORS**

AUSTIN · HOUSTON · WICHITA · DENVER · CALGARY

- + Spackler SWD No. 1
- 1 Mile Radius
- QQ-Section (NM-PLSS 2nd Div.)
- Section (NM-PLSS 1st Div.)
- Township/Range (NM-PLSS)
- Surface Owner Property Boundary (HUGHES PROPERTIES LLC)
- NM - BLM
- NM - SLO
- Laterals
- API (30-025-...) SHL Status - Type (Count)**
- Horizontal Surface Location (41)
- ★ Active - Gas (1)
- ⚡ Active - Salt Water Disposal (1)
- ⊘ Canceled Location (2)
- ⊘ Plugged (Site Released) - Oil (2)
- ⊘ Plugged (Site Released) - Gas (1)
- API (30-025-...) BHL Status - Type (Count)**
- Active - Oil (23)
- Permitted - Oil (13)
- ⊘ Canceled Location (4)
- ⊘ Plugged (Not Released) - Oil (1)
- Lessees**
- -COG ACREAGE LP
- -COG OPERATING LLC
- -CONOCOPHILLIPS CO
- -DEVON ENERGY PROD CO LP
- -DEVON ENERGY PRODUCTION CO
- -DEVON ENERGY PRODUCTION COMPANY LP
- -OXY USA INC
- -SANTA FE ENERGY OPERATING PARTNERS LP

Source: Well SHL/BHL/Directional Data - NM-OCD/DrillingInfo (2018)



**Spackler SWD No. 1
1 Mile Offset Operators and Lessees List**

S/T/R	QQ UNIT LETTER(S)	OPERATOR	MINERAL LESSEE	MINERAL OWNER	SURFACE OWNER	ADDRESS 1	ADDRESS 2
17/23S/33E	H,I,J,O,P	COG OPERATING LLC	-	-	-	550 W TEXAS	MIDLAND, TX 79701
	N	-	COG OPERATING LLC	-	-	ONE CONCHO CENTER, 600 W. ILLINOIS AVE	MIDLAND, TX 79701
16/23S/33E	E,F,I,J,K,M,N,O,P	COG PRODUCTION LLC	-	-	-	PO BOX 2064	MIDLAND, TX 79702
	L	COG PRODUCTION LLC	-	-	-	PO BOX 2064	MIDLAND, TX 79702
		COG OPERATING LLC	-	-	-	550 W TEXAS	MIDLAND, TX 79701
15/23S/33E	M	DEVON ENERGY PRODUCTION COMPANY LP	-	-	-	20 N BROADWAY	OKLAHOMA CITY, OK 73102
22/23S/33E	D,E,L,M	DEVON ENERGY PRODUCTION COMPANY LP	-	-	-	20 N BROADWAY	OKLAHOMA CITY, OK 73102
21/23S/33E	A,B,G,H,I,J,O,P	DEVON ENERGY PRODUCTION COMPANY LP	-	-	-	20 N BROADWAY	OKLAHOMA CITY, OK 73102
	F	COG OPERATING LLC	-	-	-	550 W TEXAS	MIDLAND, TX 79701
	C,D,E,K,L,M,N	-	CONOCOPHILLIPS CO	-	-	PO BOX 7500	BARTLESVILLE, OK 74005
20/23S/33E	A,B,G,H,I,J,O,P	COG OPERATING LLC	-	-	-	550 W TEXAS	MIDLAND, TX 79701
	C,D,E,F,K,L,M	DEVON ENERGY PRODUCTION COMPANY LP	-	-	-	20 N BROADWAY	OKLAHOMA CITY, OK 73102
29/23S/33E	A,B,C,G,H	OXY USA INC	-	-	-	PO BOX 4294	HOUSTON, TX 77210
28/23S/33E	A,B,C,D,E,F,G,H	DEVON ENERGY PRODUCTION COMPANY LP	-	-	-	20 N BROADWAY	OKLAHOMA CITY, OK 73102
27/23S/33E	D	DEVON ENERGY PRODUCTION COMPANY LP	-	-	-	20 N BROADWAY	OKLAHOMA CITY, OK 73102
Surface Location	-	-	-	-	HUGHES PROPERTIES LLC	PO BOX 5097	CARLSBAD, NM 88221

Produced Water Analysis - Surrounding Areas
Czervik SWD #1

wellname	api	latitude	longitude	S	T	R	unit	ftgns	ftgew	county	state	formation	sampledate	ph	tds mgL	resistivity ohm_cm	sodium mgL	calcium mgL	iron_mgl	magnesium mgL	manganese mgL	chloride mgL	bicarbonate mgL	sulfate mgL	co2_mgl	
SPUD 16 STATE #009H	3001538059	32.3013306	-103.9873581	16	23S	29E	O	1265S	1905E	EDDY	NM	AVALON UPPER	4/16/2015	7	154164	0.06015	54960.3	797.8	35.2	202.5	0	92020.7	3660	0	1100	
SPUD 16 STATE #009H	3001538059	32.3013306	-103.9873581	16	23S	29E	O	1265S	1905E	EDDY	NM	AVALON UPPER	5/11/2011	7	154965		58687.2	719	54	131	1	91118	1671.4	1502	70	
H B 11 FEDERAL #008H	3001537900	32.2385559	-103.951973	11	24S	29E	B	330N	1650E	EDDY	NM	AVALON UPPER	6/21/2011	7	174709		64668.1	2184	20	358	0.4	104800	878.4	575	50	
REMUDA BASIN UNIT #001	3001503691	32.2886238	-103.9360428	24	23S	29E	J	1980S	1980E	EDDY	NM	BONE SPRING			271010							168800	130	100		
GAINES 21 #001	3001528638	32.1984482	-103.9862366	21	24S	29E	O	990S	1650E	EDDY	NM	BONE SPRING	12/17/1996	8.48	8856		0	601.2	0	72.915		62858.2	260504	0		
KNOLL AOK FEDERAL #001	3001528127	32.2485847	-103.970253	3	24S	29E	G	1980N	1980E	EDDY	NM	BONE SPRING	11/27/2000	6.15								84981	381	600		
CORRAL DRAW AQH FEDERAL #001	3001529396	32.2166748	-103.9455948	13	24S	29E	L	2310S	330W	EDDY	NM	BONE SPRING	12/27/2000	5.59								164963	73	190		
SPUD 16 STATE #010H	3001541148	32.3035698	-103.9833145	16	23S	29E	I	2080S	660E	EDDY	NM	BONE SPRING 1ST SAN	4/16/2015	7	152943	0.06013	54183.5	1409.3	16.2	274.9	0	92807.2	2305.8	0	400	
SPUD 16 STATE #011H	3001541149	32.3034325	-103.9833145	16	23S	29E	I	2030S	660E	EDDY	NM	BONE SPRING 1ST SAN	4/16/2015	7	153042	0.06026	53895.7	1294.2	0	272.6	0	92918.4	2708.4	0	460	
SPUD 16 STATE #012H	3001541150	32.3032951	-103.9833221	16	23S	29E	I	1980S	660E	EDDY	NM	BONE SPRING 1ST SAN	4/16/2015	7	146425	0.06343	55118.3	1444.9	11.4	312.8	0	84786.2	2659.6	0	420	
SPUD 16 STATE #008H	3001540038	32.3110275	-103.9960938	16	23S	29E	D	523N	665W	EDDY	NM	BONE SPRING 1ST SAN	6/28/2012	6.7	153751		57590.8	1198	10	244	0.3	91697	951.6	755	60	
GUY A REED #001	3001510872	32.2050591	-104.0471802	24	24S	28E	E	1980N	660W	EDDY	NM	DELAWARE	10/26/1966	6.1	130273							78600	14	605		
MALAGA UNIT #001	3001502494	32.2241287	-104.0375977	13	24S	28E	B	330N	1650E	EDDY	NM	DELAWARE			148288							91050	182	400		
CONTINENTAL FED #002	3001510172	32.1136971	-103.9099655	20	25S	30E	L	1980S	660W	EDDY	NM	DELAWARE	10/8/1959									97030	68	510		
R & B FED FED A #001	3001504752	32.1356773	-103.9099731	17	25S	30E	D	664N	667W	EDDY	NM	DELAWARE	5/17/1966	7	146809							89710	24	346		
HOPP FED #001	3001504738	32.1541061	-103.8926697	4	25S	30E	M	660S	660W	EDDY	NM	DELAWARE			146106							89810	40	403		
HOPP FED #001	3001504738	32.1541061	-103.8926697	4	25S	30E	M	660S	660W	EDDY	NM	DELAWARE			180137							110500	232	1199		
R AND B FEDERAL #001Y	3001504753	32.1358185	-103.9101486	17	25S	30E	D	611N	614W	EDDY	NM	DELAWARE			146130							89700	24	346		
BENNETT FEDERAL #001	3001524071	32.0954132	-103.9184418	30	25S	30E	O	660S	1980E	EDDY	NM	DELAWARE	3/23/1982	6.85	100240		51658	2400	2.5	4000		93000	640	3756		
BENNETT FEDERAL #001	3001524071	32.0954132	-103.9184418	30	25S	30E	O	660S	1980E	EDDY	NM	DELAWARE	6/1/1983	6	103300		53495	3120	10	3080		97000	100			
CONTINENTAL FEDERAL #001	3001510048	32.1210632	-103.9099731	20	25S	30E	D	660N	660W	EDDY	NM	DELAWARE			311052							186800	86	2820		
CONTINENTAL FEDERAL #001	3001510048	32.1210632	-103.9099731	20	25S	30E	D	660N	660W	EDDY	NM	DELAWARE			170607							104300	81	1003		
CONTINENTAL FEDERAL #001	3001510048	32.1210632	-103.9099731	20	25S	30E	D	660N	660W	EDDY	NM	DELAWARE			193989							119700	82	1446		
SUPERIOR STATE #002	3001510181	32.1430664	-103.8969803	8	25S	30E	I	1980S	660E	EDDY	NM	DELAWARE			155173							92820	122	133		
SUPERIOR STATE #002	3001510181	32.1430664	-103.8969803	8	25S	30E	I	1980S	660E	EDDY	NM	DELAWARE			150830											
SPUD 16 STATE #007H	3001536078	32.3099632	-103.995636	16	23S	29E	D	910N	810W	EDDY	NM	DELAWARE-BRUSHY CA	7/14/2014	6.3	298475		74542.2	32307.5	51.6	4723.3	10.04	182394	25	3.4	410	
LAGUNA SALADO 22 FEDERAL #001	3001536461	32.294426	-103.9730835	22	23S	29E	C	1240N	2510W	EDDY	NM	DELAWARE-BRUSHY CA	2/25/2015	6.2	297620		71506.6	31763.4	60.5	4690.6	11.03	186000	188	0	300	
LAGUNA SALADO 22 FEDERAL #001	3001536738	32.2922592	-103.9752045	22	23S	29E		2030N	1855W	EDDY	NM	DELAWARE-BRUSHY CA	2/25/2015	6.1	288731		69567.3	31995.5	59	4780.6	10.36	179020.5	122	0	300	
LAGUNA SALADO 22 FEDERAL #001	3001535073	32.2835922	-103.9787598	22	23S	29E	M	130S	760W	EDDY	NM	DELAWARE-BRUSHY CA	3/10/2015	6.5	108093	0.04824	72995	26487.3	283.7	4547.4	17.1				1430	
LAGUNA SALADO 22 FEDERAL #001	3001536461	32.294426	-103.9730835	22	23S	29E	C	1240N	2510W	EDDY	NM	DELAWARE-BRUSHY CA	3/10/2015	6.3	302545	0.04833	72865	32249.2	56.3	4836.7	11.18	188800	36.6	0	420	
LAGUNA SALADO 22 FEDERAL #001	3001536738	32.2922592	-103.9752045	22	23S	29E		2030N	1855W	EDDY	NM	DELAWARE-BRUSHY CA	3/10/2015	6.2	294876	0.04844	71940.2	32644.8	53	4969.8	10.75	181883.2	61	0	350	
SPUD 16 STATE #007H	3001536078	32.3099632	-103.995636	16	23S	29E	D	910N	810W	EDDY	NM	DELAWARE-BRUSHY CA	4/16/2015	6	303155	0.04979	76907.7	33274.3	61.8	4821.1	10.2	183875.4	610	0	2000	
LAGUNA SALADO 22 FEDERAL #001	3001536461	32.294426	-103.9730835	22	23S	29E	C	1240N	2510W	EDDY	NM	DELAWARE-BRUSHY CA	4/16/2015	6.9	292358	0.1431	68893.3	31112	55.4	4508.7	10.57	184250	244	0	360	
LAGUNA SALADO 22 FEDERAL #001	3001536738	32.2922592	-103.9752045	22	23S	29E		2030N	1855W	EDDY	NM	DELAWARE-BRUSHY CA	4/16/2015	6.5	292239	0.04954	69172.3	31471.9	52.1	4556.6	10.16	183597.2	122	0	320	
HARROUN TRUST 31 #004H	3001540826	32.2551231	-104.0195923	31	23S	29E	O	330S	1345E	EDDY	NM	DELAWARE-BRUSHY CA	4/16/2015	7	297841	0.04949	79092.1	29745.4	70.1	4416.8	8.77	180802.1	85.4	0	2000	
HARROUN TRUST 31 #005H	3001540827	32.2551231	-104.0194244	31	23S	29E	P	330S	1295E	EDDY	NM	DELAWARE-BRUSHY CA	4/16/2015	6	295110	0.04941	76800.3	28511.9	59.9	4244.8	8.25	181794.5	73.2	0	2000	
HARROUN TRUST 31 30 FEDERAL #001	3001541963	32.2551956	-104.0280991	31	23S	29E	M	330S	1305W	EDDY	NM	DELAWARE-BRUSHY CA	4/16/2015	6	296788	0.04959	80277.8	29889.4	64.8	4475.1	7.97	178388.3	73.2	0	2000	
LAGUNA SALADO 22 FEDERAL #001	3001535073	32.2835922	-103.9787598	22	23S	29E	M	130S	760W	EDDY	NM	DELAWARE-BRUSHY CA	4/26/2007	5	303550		80233.3	27451	49	4197	9	187467	103.7	331		
SPUD 16 STATE #007H	3001536078	32.3099632	-103.995636	16	23S	29E	D	910N	810W	EDDY	NM	DELAWARE-BRUSHY CA	8/29/2008	6.25	273399		77650.2	20696	44	3301	6.5	168200	85	454	440	
LAGUNA SALADO 22 FEDERAL #001	3001537371	32.2946129	-103.9730835	22	23S	29E	C	1172N	2510W	EDDY	NM	DELAWARE-BRUSHY CA	7/14/2011	7	279275		78992.3	21728	25	3407	6.5	172189	183	177	250	
REMUDA BASIN UNIT #001	3001503691	32.2886238	-103.9360428	24	23S	29E	J	1980S	1980E	EDDY	NM	DEVONIAN			64582							37500	610	1700		
REMUDA BASIN UNIT #001	3001503691	32.2886238	-103.9360428	24	23S	29E	J	1980S	1980E	EDDY	NM	DEVONIAN			56922							29000	1740	4980		

Spackler SWD No. 1
1 Mile Area of Review List

43732	THISTLE UNIT #121H	O	N	DEVON ENERGY PRODUCTION COMPANY, LP	0	32.29669400000	-103.57150960000	12/31/9999
43733	THISTLE UNIT #158H	O	N	DEVON ENERGY PRODUCTION COMPANY, LP	0	32.2821973000	-103.578245150	12/31/9999