



# FORM C-108 Technical Review Summary [Prepared by reviewer and included with application; V17]

**DATE RECORD:** First Rec: \_\_\_\_\_ **Admin Complete:** \_\_\_\_\_ **or Suspended:** \_\_\_\_\_ Add. Request/Reply: \_\_\_\_\_

**ORDER TYPE:** \_\_\_\_\_ **Number:** \_\_\_\_\_ **Order Date:** \_\_\_\_\_ **Legacy Permits/Orders:** \_\_\_\_\_

Well No. \_\_\_\_\_ Well Name(s): \_\_\_\_\_

API : 30-0 \_\_\_\_\_ Spud Date: \_\_\_\_\_ New or Old (EPA): \_\_\_\_\_ (**UIC Class II Primacy 03/07/1982**)

Footages \_\_\_\_\_ Lot \_\_\_\_\_ or Unit \_\_\_\_\_ Sec \_\_\_\_\_ Tsp \_\_\_\_\_ Rge \_\_\_\_\_ County \_\_\_\_\_

Latitude: \_\_\_\_\_ Longitude \_\_\_\_\_ Pool: \_\_\_\_\_ Pool No.: \_\_\_\_\_

Operator: \_\_\_\_\_ OGRID: \_\_\_\_\_ Contact: \_\_\_\_\_ Email: \_\_\_\_\_

**COMPLIANCE RULE 5.9:** Total Wells: \_\_\_\_\_ Inactive: \_\_\_\_\_ **Fincl Assur:** \_\_\_\_\_ Compl. Order? \_\_\_\_\_ **IS 5.9 OK?** \_\_\_\_\_ **Date:** \_\_\_\_\_

**WELL FILE REVIEWED** Current Status: \_\_\_\_\_

**WELL DIAGRAMS:** **NEW:** Proposed ☐ or **RE-ENTER:** Before Conv. ☐ After Conv. ☐ Logs in Imaging: \_\_\_\_\_

Planned Rehab Work to Well: \_\_\_\_\_

Well Construction Details		Sizes (in) Borehole / Pipe	Setting Depths (ft)	Cement Sx or Cf	Cement Top and Determination Method
Planned _____ or Existing _____ <b>Surface</b>			Stage Tool		
Planned _____ or Existing _____ <b>Interm/Prod</b>					
Planned _____ or Existing _____ <b>Interm/Prod</b>					
Planned _____ or Existing _____ <b>Prod/Liner</b>					
Planned _____ or Existing _____ <b>Liner</b>					
Planned _____ or Existing _____ <b>OH / PERF</b>			Inj Length	<b>Completion/Operation Details:</b>	
<b>Injection Lithostratigraphic Units:</b>	Depths (ft)	Injection or Confining Units		Tops	
Adjacent Unit: Litho. Struc. Por.				Drilled TD _____ PBTD _____	
Confining Unit: Litho. Struc. Por.				NEW TD _____ NEW PBTD _____	
Proposed Inj Interval TOP:				NEW Open Hole _____ NEW Perfs _____	
Proposed Inj Interval BOTTOM:				Tubing Size _____ in. Inter Coated? _____	
Confining Unit: Litho. Struc. Por.				Proposed Packer Depth _____ ft	
Adjacent Unit: Litho. Struc. Por.				Min. Packer Depth _____ (100-ft limit)	
<b>AOR: Hydrologic and Geologic Information</b>				Proposed Max. Surface Press. _____ psi	
				Admin. Inj. Press. _____ (0.2 psi per ft)	
<b>POTASH:</b> R-111-P _____ Noticed? _____ <b>BLM Sec Ord</b> WIPP Noticed? _____ <b>Salt/Salado T:</b> _____ <b>B:</b> _____ <b>NW:</b> Cliff House fm _____					
<b>USDW:</b> Aquifer(s) _____ Max Depth _____ <b>HYDRO AFFIRM STATEMENT By Qualified Person</b>					
<b>NMOSE Basin:</b> _____ <b>CAPITAN REEF:</b> thru _____ adj _____ <b>NA</b> _____ <b>No. GW Wells in 1-Mile Radius?</b> _____ <b>FW Analysis?</b> _____					
<b>Disposal Fluid:</b> Formation Source(s) _____ Analysis? _____ On Lease <input type="radio"/> Operator Only <input type="radio"/> Commercial <input type="radio"/>					
<b>Disposal Interval:</b> Inject Rate (Avg/Max BWPD): _____ Protectable Waters? _____ Source: _____ System: Closed or Open					
<b>HC Potential:</b> Producing Interval? _____ Formerly Producing? _____ Method: Logs /DST /P&A /Other _____ 2-Mi Radius Pool Map _____					
<b>AOR Wells:</b> 1/2-M _____ or ONE-M _____ <b>RADIUS MAP/WELL LIST: Total Penetrating Wells:</b> _____ [AOR Hor: _____ AOR SWDs: _____]					
<b>Penetrating Wells: No. Active Wells</b> _____ <b>No. Corrective?</b> _____ on which well(s)? _____ Diagrams? _____					
<b>Penetrating Wells: No. P&amp;A Wells</b> _____ <b>No. Corrective?</b> _____ on which well(s)? _____ Diagrams? _____					
<b>Induced-Seismicity Risk Assess:</b> analysis submitted _____ historical/catalog review _____ fault-slip model _____ <b>probability</b> _____					
<b>NOTICE:</b> 1/2-M _____ or ONE-M _____ : Newspaper Date _____ <b>Mineral Owner*</b> _____ Surface Owner _____ N. Date _____					
<b>RULE 26.7(A): Identified Tracts?</b> _____ <b>Affected Persons*:</b> _____ N. Date _____					

\* new definition as of 12/28/2018 [any the mineral estate of United States or state of New Mexico; SWD operators within the notice radius]

**Order Conditions:** Issues: \_\_\_\_\_

**Additional COAs:** \_\_\_\_\_