Cross Timbers Operating Company

OIL CONSERVATION DIVISION
RECEIVED
'91 NOV 12 AM 9 27

November 6, 1991

Mr. William J. Lemay
Director
Oil Conservation Division
P. O. Box 2088
Sante Fe, New Mexico 87504

Re: Unorthodox Location
SMGSAU Tract 6 Well No. 8
125' FSL, 1,345' FWL
Unit N, Section 29, T17S, R33E
Lea County, New Mexico

Dear Mr. Lemay:

Cross Timbers Operating Company respectfully requests administrative approval to drill the captioned well at an unorthodox location.

It is Cross Timbers' opinion that a well at this location will respond to the secondary recovery efforts in the SMGSAU and recover oil that cannot be recovered by any other well in the unit.

All offset operators have been notified of Cross Timbers Operating Company's intent to drill the captioned well by a copy of this application.

Thank you for your consideration of this matter.

Sincerely,

CROSS TIMBERS OPERATING COMPANY

R-3134

Gary L. Markestad
Operations Engineer

GLM/kg
Attachment

cc: GLM File
Well File

3000 North Garfield, Suite 250, P.O. Box 50847, Midland, Texas 79710
(915) 682-8873 Fax (915) 687-0862

The following parties have been notified of Cross Timbers Operating Company's intent to drill the SMGSAU Tract 6 Well No. 8 at an unorthodox location:

Pennzoil Exploration and Production Company
Drawer 1828
Midland, Texas 79702-1828

Phillips Petroleum Company
4001 Penbrook
Odessa, Texas 79762

Oxy USA, Inc.
Box 50250
Midland, Texas 79710

Brothers Production Company
Box 7515
Midland, Texas 79708

Dallas McCasland
Box 206
Eunice, New Mexico 88231

Conoco, Inc.
10 Desta Drive
Suite 100 W.
Midland, Texas 79705-4500

Certified by:

Gary L. Markestad
Operations Engineer

Submit to Appropriate
District Office
State Lease – 6 copies
Fee Lease – 5 copies

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-101
Revised 1-1-89

API NO. (assigned by OCD on New Wells)

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No. B-2516

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:
DRILL [X] RE-ENTER [ ] DEEPEN [ ] PLUG BACK [ ]

b. Type of Well:
OIL WELL [X] GAS WELL [ ] OTHER SINGLE ZONE [X] MULTIPLE ZONE [ ]

7. Lease Name or Unit Agreement Name: SMGSAU Tract 6

2. Name of Operator: Cross Timbers Operating Company

8. Well No. 8

3. Address of Operator: P. O. Box 50847, Midland, Texas 79710

9. Pool name or Wildcat: Maljamar (G-SA)

4. Well Location
Unit Letter N : 125 Feet From The South Line and 1,345 Feet From The West Line

Section 29 Township 17S Range 33E NMPM Lea County

10. Proposed Depth	11. Formation	12. Rotary or C.T.
4,600'	San Andres	Rotary

13. Elevations (Show whether DF, RT, GR, etc.)	14. Kind & Status Plug. Bond	15. Drilling Contractor	16. Approx. Date Work will start
4,038.9' (GR)	Blanket	Peterson	12/2/91

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12-1/4"	8-5/8"	23#	300'	200	Surface
7-7/8"	5-1/2"	15.5#	4,600'	1,150	Surface

Drill 12-1/4" hole to 300'.
Set & cmt 8-5/8" 23# LS csg w/200sx Class "C" w/2% CaCl.
Drill 7-7/8" hole to 4,600' using 10# brine wtr, starch & salt gel.
Set & cmt 5-1/2" 15.5# J-55 csg w/900sx Lite & 250sx Class "C" (cmt vol may vary depending on calipered hole vol).

BOP Program:

11", 3,000 psi, hydraulically operated double ram.
(1) pipe ram, (1) blind ram.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE Gary L. Markestad TITLE Operations Engineer DATE 11/6/91

TYPE OR PRINT NAME Gary L. Markestad TELEPHONE NO. (915)682-887

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Submit to Appropriate
District Office
State Lease - 4 copies
Fee Lease - 3 copies

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-102
Revised 1-1-89

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator	Lease	Well No.
Cross Timbers Operating Company	SMGSAU Tract 6	8

Unit Letter	Section	Township	Range	County
N	29	17 South	33 East NMPM	Lea

Actual Footage Location of Well:
1345 feet from the West line and 125 feet from the South line

Ground level Elev.	Producing Formation	Pool	Dedicated Acreage:
4038.9	Grayburg-San Andres	Maljamar (G-SA)	40 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.

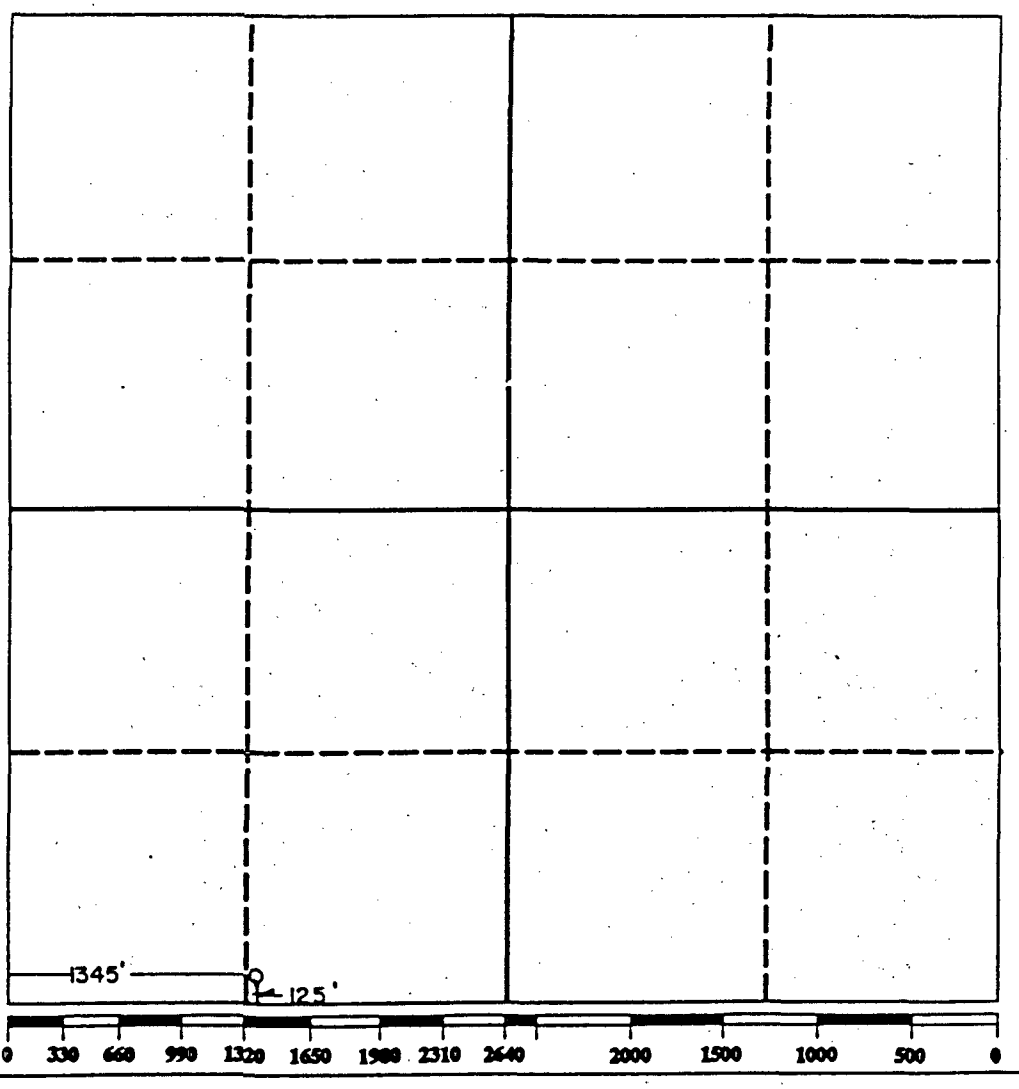
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?

☒ Yes ☐ No If answer is "yes" type of consolidation Unitized (1080 acres)

If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary. _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

I hereby certify that the information contained herein in true and complete to the best of my knowledge and belief.

Signature: Gary L. Markestad

Printed Name: Gary L. Markestad

Position: Operations Engineer

Company: Cross Timbers Operating Compan

Date: November 6, 1991

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 supervison, and that the same is true and correct to the best of my knowledge and belief.

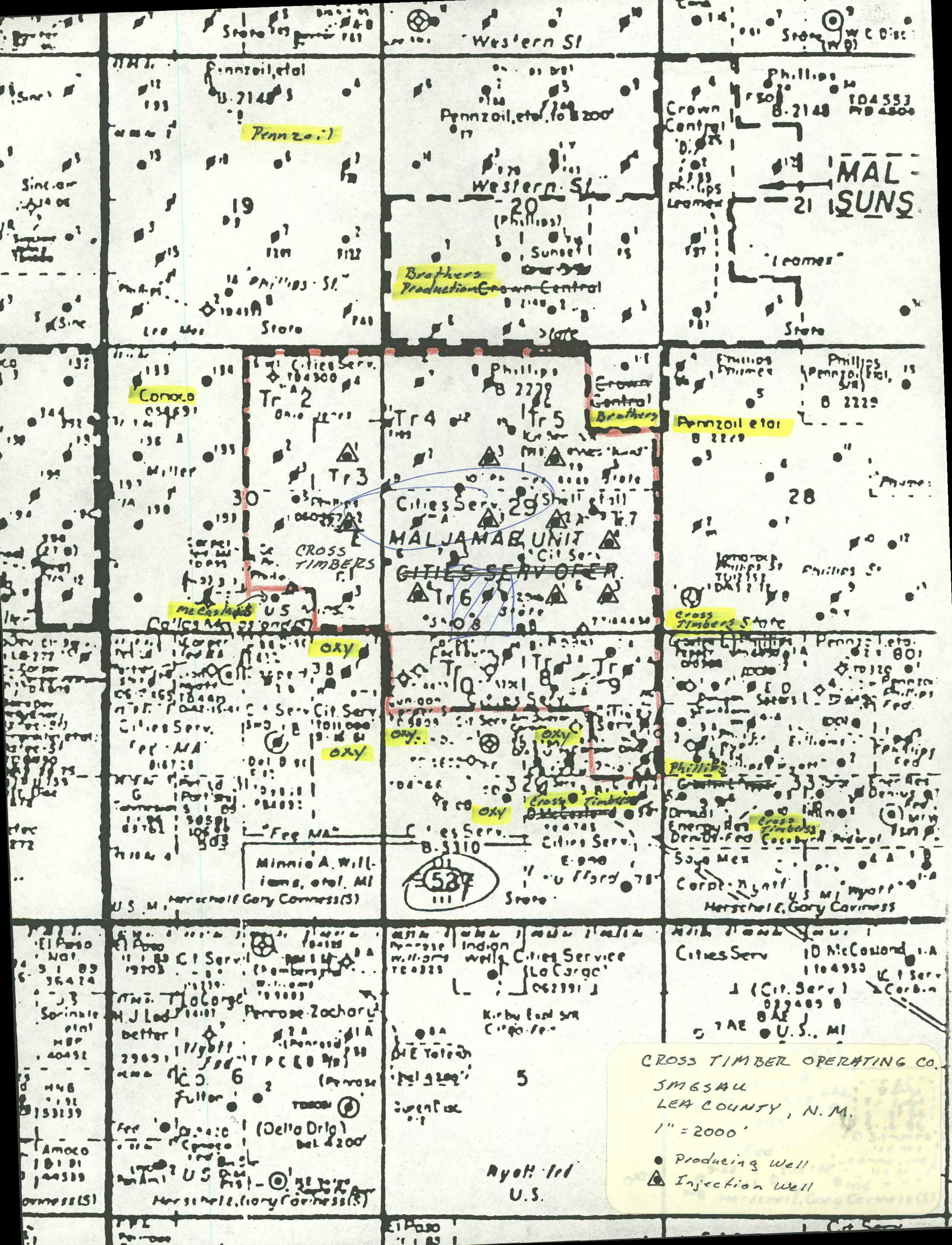
Date Surveyed: October 21, 1991

Signature & Seal of Professional Surveyor: REGISTERED LAND SURVEYOR No. 3239 NEW MEXICO RONALD J. EIDSON

Certificate No. JOHN W. WEST 676
RONALD J. EIDSON 3239

W.O. 91111-0161

128630



CROSS TIMBER OPERATING CO.
SMGSAU
LEA COUNTY, N.M.
1" = 2000'
Producing Well
Injection Well
MALJAMAR UNIT
CITIES SERV OPER.
CROSS TIMBERS
MAL SUNS
Pennzoil
Brothers Production
Crown Central
Conoco
Pennzoil etal
Brothers
McCasland
Cross Timbers
OXY
Phillips
Cities Serv.
Western SI
Phillips SI
Tr 2
Tr 3
Tr 4
Tr 5
Tr 6
19
20
21
28
29
30
5
6
Minnie A. Williams, etal. MI
Herschell Gary Corlness
El Paso
Amoco
Indian Wells
Cities Service
Penrose Zachary

completed on the reverse side?

● SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fee.
1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge)

3. Article Addressed to:
Pennzoil Exploration and Production Company
Drawer 1828
Midland, Texas 79702-1828

4. Article Number
P 652 035 057

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

Always obtain signature of addressee or agent and DATE DELIVERED.

PS Form 3811, Apr. 1989 * U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

Thank You for using Return Receipt Service.

P 652 035 057

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to: Pennzoil Exploration & Proc Co.
Street and No.: Drawer 1828
P.O., State and ZIP Code: Midland, TX 79702-1828

Postage	$ .52
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	1.00
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	$ 2.52
Postmark or Date	11/7/91

PS Form 3800, Feb. 1982 * U.S.G.P.O. 1983-403-517

CERTIFIED

P 652 035 057

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Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fee.
1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge)

3. Article Addressed to:
Phillips Petroleum Company
4001 Penbrook
Odessa, Texas 79762

4. Article Number
P 652 035 055

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

Always obtain signature of addressee or agent and DATE DELIVERED.

PS Form 3811, Apr. 1989 * U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

Thank You for using Return Receipt Service.

P 652 035 055

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to: Phillips Petroleum Company
Street and No.: 4001 Penbrook
P.O., State and ZIP Code: Odessa, Texas 79762

Postage	$ .52
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	1.00
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	$ 2.52
Postmark or Date	11/7/91

PS Form 3800, Feb. 1982 * U.S.G.P.O. 1983-403-517

CERTIFIED

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1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge)

3. Article Addressed to:
Oxy USA, Inc.
Box 50250
Midland, Texas 79710

4. Article Number
P 652 035 056

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

Always obtain signature of addressee or agent and DATE DELIVERED.

PS Form 3811, Apr. 1989 * U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

Thank You for using Return Receipt Service.

P 652 035 056

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to: Oxy USA, Inc.
Street and No.: Box 50250
P.O., State and ZIP Code: Midland, Texas 79710

Postage	$ .52
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	1.00
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	$ 2.52
Postmark or Date	11/7/91

PS Form 3800, Feb. 1982 * U.S.G.P.O. 1983-403-517

CERTIFIED

P 652 035 056

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1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge)

3. Article Addressed to:
Brothers Production Company
Box 7515
Midland, Texas 79708

4. Article Number
P 652 035 053

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

Always obtain signature of addressee or agent and DATE DELIVERED.

PS Form 3811, Apr. 1989 * U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

Thank You for using Return Receipt Service.

P 652 035 053

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

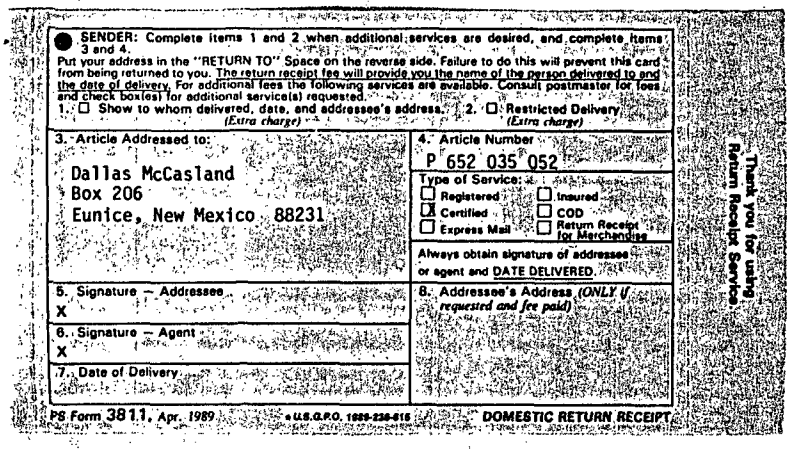
Sent to: Brothers Production Company
Street and No.: Box 7515
P.O., State and ZIP Code: Midland, Texas 79708

Postage	$ .52
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	1.00
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	$ 2.52
Postmark or Date	11/7/91

PS Form 3800, Feb. 1982 * U.S.G.P.O. 1983-403-517

CERTIFIED

P 652 035 053



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1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

Dallas McCasland
Box 206
Eunice, New Mexico 88231

4. Article Number
P 652 035 052

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

Thank You for Using Return Receipt Service.

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P 652 035 052

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(See Reverse)

Sent to	Dallas McCasland
Street and No.	Box 206
P.O. State and ZIP Code	Eunice, New Mexico 88231
Postage	$ .52
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	1.00
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	$ 2.52
Postmark or Date	11/7/91

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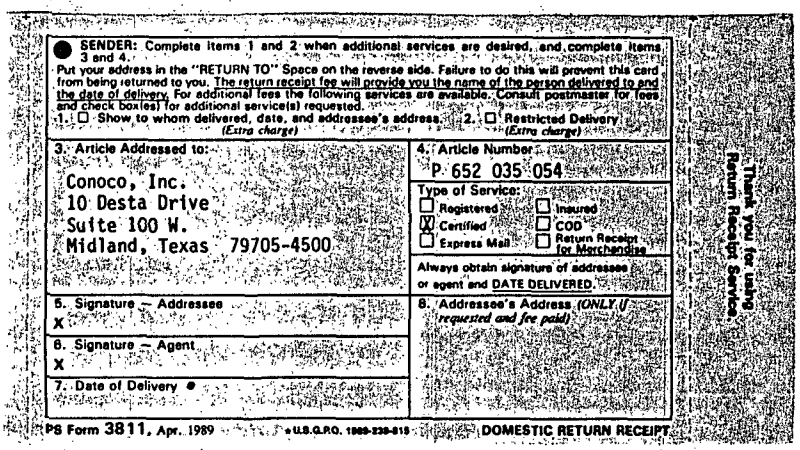
CERTIFIED MAIL
P 652 035 052



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1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

Conoco, Inc.
10 Desta Drive
Suite 100 W.
Midland, Texas 79705-4500

4. Article Number
P 652 035 054

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

Thank You for Using Return Receipt Service.

PS Form 3811, Apr. 1989 * U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

P 652 035 054

RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

Sent to	Conoco, Inc., 10 Desta Drive
Street and No.	Suite 100 W.
P.O. State and ZIP Code	Midland, Texas 79705-4500
Postage	$ .52
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	1.00
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	$ 2.52
Postmark or Date	11/7/91

PS Form 3800, Feb. 1982 * U.S.G.P.O. 1983-403-517

CERTIFIED MAIL
P 652 035 054