

**ARCO Oil and Gas Company** 

Western District  
600 N. Marienfeld  
Midland, Texas 79701  
Post Office Box 1610  
Midland, Texas 79702  
Telephone 915 688 5200

OIL CONSERVATION DIVISION

RECEIVED

APR 22 1993 9 00 AM

April 22, 1993

Mr. William J. LeMay  
New Mexico Oil Conservation Division  
P. O. Box 2088  
Santa Fe, New Mexico 87501

RE: Additional Information and Request for Approval  
3/18/93 Application for Unorthodox Jalmat Gas Well Location and  
Simultaneous Dedication  
H. S. Record WN #3  
S/2 Section 10, T22S, R36E, Lea County, New Mexico  
Jalmat (Tansill/Yates/Seven Rivers) Pool

Dear Mr. LeMay:

ARCO Oil and Gas Company respectfully requested, by application to your office on 3/18/93, administrative approval for an unorthodox Jalmat gas well location for the H. S. Record WN #3 well located 1980' FSL, 660' FWL, Section 10, T22S, R36E in Lea County, New Mexico. At the same time, ARCO requested simultaneous dedication of the Jalmat gas production from the H. S. Record WN #1, #2, and #6 with the Jalmat gas production from the H. S. Record WN #3 well.

ARCO Oil and Gas Company notified the offset operators of that application by sending a copy of the application package, along with Waiver to Objection forms, by certified mail. Attached with this follow-up letter are copies of the certified mail receipts sent to all offset operators, showing that they have all received a copy of this application and have had more than 21 days to respond to either ARCO or the NMOCD. Also attached are copies of signed waiver forms from 1 offset operator, indicating that they have no objection to the proposed work. Since signed waivers have been received from 1 offset operator, and since all offset operators have received notice of ARCO's application by certified mail and have had sufficient time to respond to the application, and no offset operators have objected to this application, ARCO respectfully requests that the NMOCD grant prompt administrative approval of this request.

If you need further information, please call me at (915) 688-5446.

Sincerely,

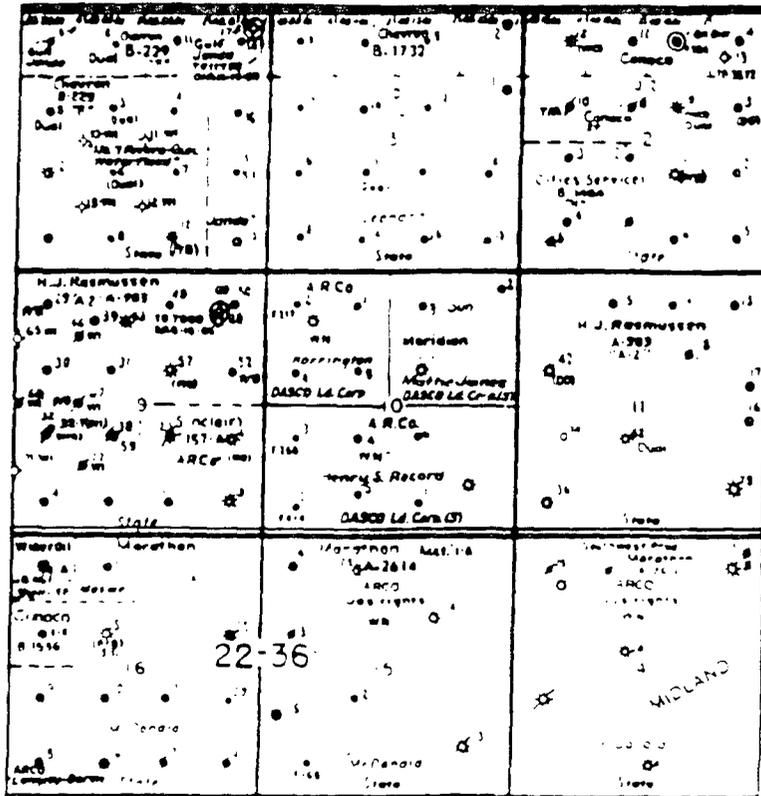


David K. Newell  
Senior Operations/Analytical Engineer

Attachments: Certified Mail Receipts Waiver to Objection Forms  
Offset Operator List 3/18/93 Application

ARCO OIL AND GAS COMPANY  
 Application for an  
 Unorthodox Jalmat Gas Well Location  
 H. S. Record WN #3

Simultaneous Dedication of Jalmat Gas Production  
 H. S. Record WN #1, #2, and #6 (existing)  
 H. S. Record WN #3 (new)  
 Jalmat Gas Pool  
 S/2 Section 10, T22S, R36E  
 Lea County, New Mexico



OFFSET OPERATORS

Chevron, USA  
 Clayton Williams, Jr.  
 Marathon Oil  
 Meridian Oil

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt Fee will provide you the signature of the person delivered to and the date of delivery.

I also wish to receive the following services (for an extra fee):

1.  Addressee's Address
2.  Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

Chevron USA, Inc.  
Attn: A. W. Bohling  
P. O. Box 1150  
Midland, Texas 79702

4a. Article Number

P 322 151 826

4b. Service Type

- Registered  Insured
- Certified  COD
- Express Mail  Return Receipt for Merchandise

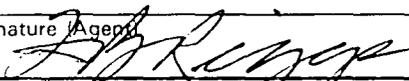
7. Date of Delivery

MAR 29 1993

5. Signature (Addressee)

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

6. Signature (Agent)



PS Form 3811, November 1990 ☆ U.S. GPO: 1991-287-066

**DOMESTIC RETURN RECEIPT****SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt Fee will provide you the signature of the person delivered to and the date of delivery.

I also wish to receive the following services (for an extra fee):

1.  Addressee's Address
2.  Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

Clayton W. Williams, Jr.  
Attn: Matt Swierc  
6 Desta Drive, Suite 3000  
Midland, Texas 79705

4a. Article Number

P 322 151 824

4b. Service Type

- Registered  Insured
- Certified  COD
- Express Mail  Return Receipt for Merchandise

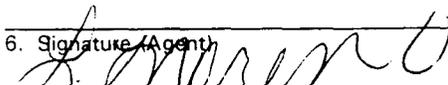
7. Date of Delivery

3.29.93

5. Signature (Addressee)

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

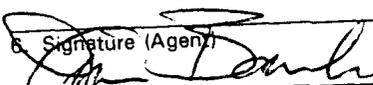
6. Signature (Agent)



PS Form 3811, November 1990 ☆ U.S. GPO: 1991-287-066

**DOMESTIC RETURN RECEIPT**

|   |  |   |  |
|---|--|---|--|
| <b>SENDER:</b><br><ul style="list-style-type: none"> <li>• Complete items 1 and/or 2 for additional services.</li> <li>• Complete items 3, and 4a &amp; b.</li> <li>• Print your name and address on the reverse of this form so that we can return this card to you.</li> <li>• Attach this form to the front of the mailpiece, or on the back if space does not permit.</li> <li>• Write "Return Receipt Requested" on the mailpiece below the article number.</li> <li>• The Return Receipt Fee will provide you the signature of the person delivered to and the date of delivery.</li> </ul> |  | I also wish to receive the following services (for an extra fee):<br>1. <input type="checkbox"/> Addressee's Address<br>2. <input type="checkbox"/> Restricted Delivery<br>Consult postmaster for fee.  |  |
| 3. Article Addressed to:<br><br>Meridian Oil Inc.<br>Attn: Connie L. Malik<br>P. O. Box 51810<br>Midland, Texas 79710-1810  |  | 4a. Article Number<br><b>P 322 151 825</b>  |  |
|   |  | 4b. Service Type<br><input type="checkbox"/> Registered <input type="checkbox"/> Insured<br><input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD<br><input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise |  |
|   |  | 7. Date of Delivery<br><b>MAR 29 1993</b>   |  |
| 5. Signature (Addressee)  |  | 8. Addressee's Address (Only if requested and fee is paid)  |  |
| 6. Signature (Agent)<br>   |  |   |  |
| PS Form 3811, November 1990 ☆ U.S. GPO: 1991-287-068  |  | <b>DOMESTIC RETURN RECEIPT</b>  |  |

|   |  |   |  |
|---|--|---|--|
| <b>SENDER:</b><br><ul style="list-style-type: none"> <li>• Complete items 1 and/or 2 for additional services.</li> <li>• Complete items 3, and 4a &amp; b.</li> <li>• Print your name and address on the reverse of this form so that we can return this card to you.</li> <li>• Attach this form to the front of the mailpiece, or on the back if space does not permit.</li> <li>• Write "Return Receipt Requested" on the mailpiece below the article number.</li> <li>• The Return Receipt Fee will provide you the signature of the person delivered to and the date of delivery.</li> </ul> |  | I also wish to receive the following services (for an extra fee):<br>1. <input type="checkbox"/> Addressee's Address<br>2. <input type="checkbox"/> Restricted Delivery<br>Consult postmaster for fee.  |  |
| 3. Article Addressed to:<br><br>Marathon Oil<br>P. O. Box 552<br>Midland, Texas 79702   |  | 4a. Article Number<br><b>P 322 151 827</b>  |  |
|   |  | 4b. Service Type<br><input type="checkbox"/> Registered <input type="checkbox"/> Insured<br><input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD<br><input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise |  |
|   |  | 7. Date of Delivery<br><b>MAR 29 1993</b>   |  |
| 5. Signature (Addressee)  |  | 8. Addressee's Address (Only if requested and fee is paid)  |  |
| 6. Signature (Agent)<br>   |  |   |  |
| PS Form 3811, November 1990 ☆ U.S. GPO: 1991-287-068  |  | <b>DOMESTIC RETURN RECEIPT</b>  |  |

Offset Operators:

Please indicate your approval for our request as detailed in the attached package by signing the waiver form below. Please return the signed waiver in the enclosed stamped, self-addressed envelope.

Thank you for your cooperation in this matter.

**WAIVER TO OBJECTION**

**ARCO OIL AND GAS COMPANY**

**Application for an  
Unorthodox Jalmat Gas Well Location  
H. S. Record WN #3  
and  
Simultaneous Dedication of Jalmat Gas Production  
H. S. Record WN #1, #2, and #6 (existing)  
H. S. Record WN #3 (new)  
Jalmat Gas Pool  
S/2 Section 10, T22S, R36E, Lea County, NM  
Lea County, New Mexico**

I/We do hereby waive any objection to ARCO Oil and Gas Company's request for NMOCD Administrative Approval of an unorthodox well location for the H. S. Record WN #3, and simultaneous dedication of Jalmat gas production from the H. S. Record WN #1, #2, #3 and #6 to an existing 320-acre proration unit.

Signed:

Title:

Company:

Date:

  
\_\_\_\_\_  
Production Supt.  
\_\_\_\_\_  
Clayton W. Williams, Jr., Inc.  
\_\_\_\_\_  
3-30-93  
\_\_\_\_\_