

634

CHECKLIST for ADMINISTRATIVE INJECTION APPLICATIONS

Operator: RAY INSTALL Well: LUK DISPOSAL No. 1
 Contact: RANDY HARRIS Title: GEOLOGIST Phone: 505-677-2370

DATE IN _____ RELEASE DATE _____ DATE OUT _____

Proposed Injection Application is for: WATERFLOOD Expansion Initial

Original Order: R- _____ Secondary Recovery Pressure Maintenance

SENSITIVE AREAS

SALT WATER DISPOSAL

Commercial Well

WIPP X 7.195.33E Capitan Reef

Data is complete for proposed well(s)? _____ Additional Data Req'd _____

* RIGHT ON EXTREME SHEETWARD EDGE.

AREA of REVIEW WELLS

4 Total # of AOR

0 # of Plugged Wells

YES Tabulation Complete

N/A Schematics of P & A's

YES Cement Tops Adequate

_____ AOR Repair Required

INJECTION FORMATION

Injection Formation(s) YATES/SR/QN 3586' - 4427' Compatible Analysis _____

Source of Water or Injectate DELAWARE

PROOF of NOTICE

YES Copy of Legal Notice

YES Information Printed Correctly *

YES Correct Operators

_____ Copies of Certified Mail Receipts

NO Objection Received

_____ Set to Hearing _____ Date

NOTES: NEWSPAPER LEGAL LEFT OUT TO SET OF PERFS. WILL PERMIT
INTERVAL AS PUBLISHED - 3586'

APPLICATION QUALIFIES FOR ADMINISTRATIVE APPROVAL? YES

COMMUNICATION WITH CONTACT PERSON:

1st Contact: _____	Telephoned _____	Letter _____	Date _____	Nature of Discussion _____
2nd Contact: _____	Telephoned _____	Letter _____	Date _____	Nature of Discussion _____
3rd Contact: _____	Telephoned _____	Letter _____	Date _____	Nature of Discussion _____



5/28/96

APPLICATION FOR AUTHORIZATION TO INJECT

- I. Purpose: ☐ Secondary Recovery ☐ Conservation ☒ Disposal ☐ Storage
Application qualifies for administrative approval? ☒ yes ☐ no
- II. Operator: RAY WESTALL
Address: P.O. Box 4, Loco Hills NEW MEXICO 88255
Contact party: RANDALL HARRIS Phone: (505) 677-2370
- 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 geological data on the injection zone including appropriate lithologic detail, geological 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 source 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 source 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: RANDALL HARRIS Title: GEOLOGIST
Signature: [Signature] Date: 5/1/96
- * If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be duplicated and resubmitted. Please show the date and circumstance 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 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, P. O. Box 2088, Santa Fe, New Mexico 87501 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

RAY WESTALL OPERATOR LUSK DISPOSAL WELL NO. 1

660' FNL & 660' FWL SECTION 7, TOWNSHIP-19-SOUTH, RANGE-33-EAST

Schematic

Tabular data

Surface Casing

Size 8 5/8" Cemented with 200 sxs
TOC Circulated Hole size 13 3/8"
Set at 265'

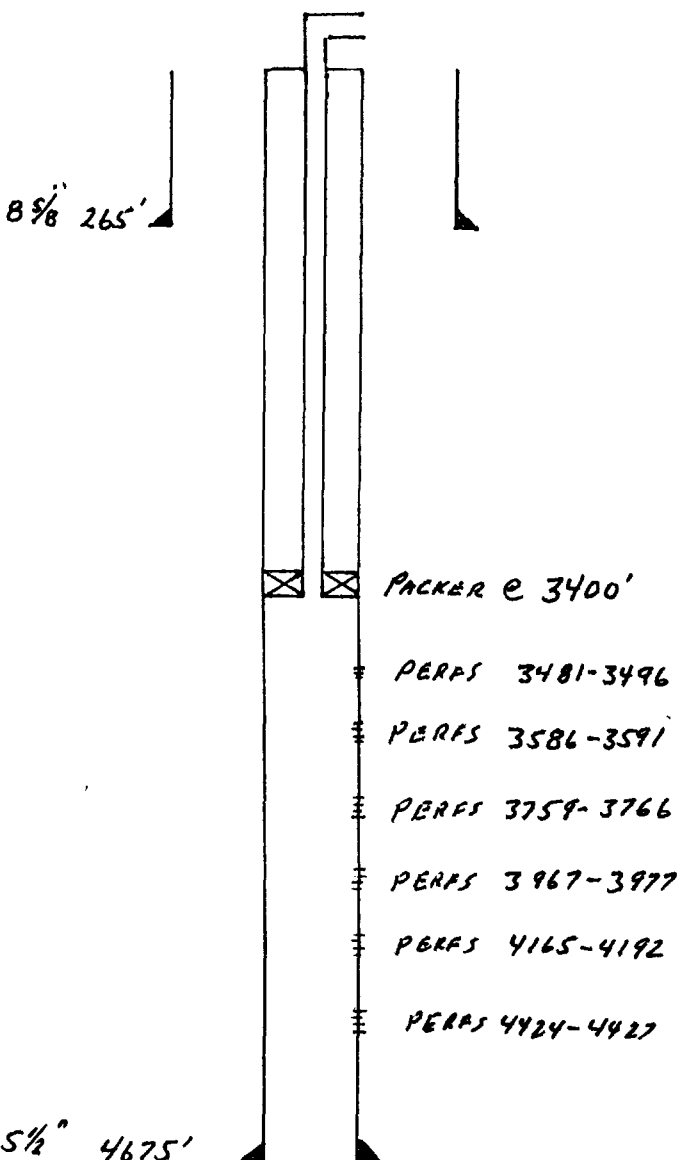
Intermediate Casing

NONE

Long string

Size 5 1/2" Cemented with 2350 sxs
TOC Circulated Hole size 7 7/8"
Total depth 4675'

Injection Interval 3481-4427 perforated



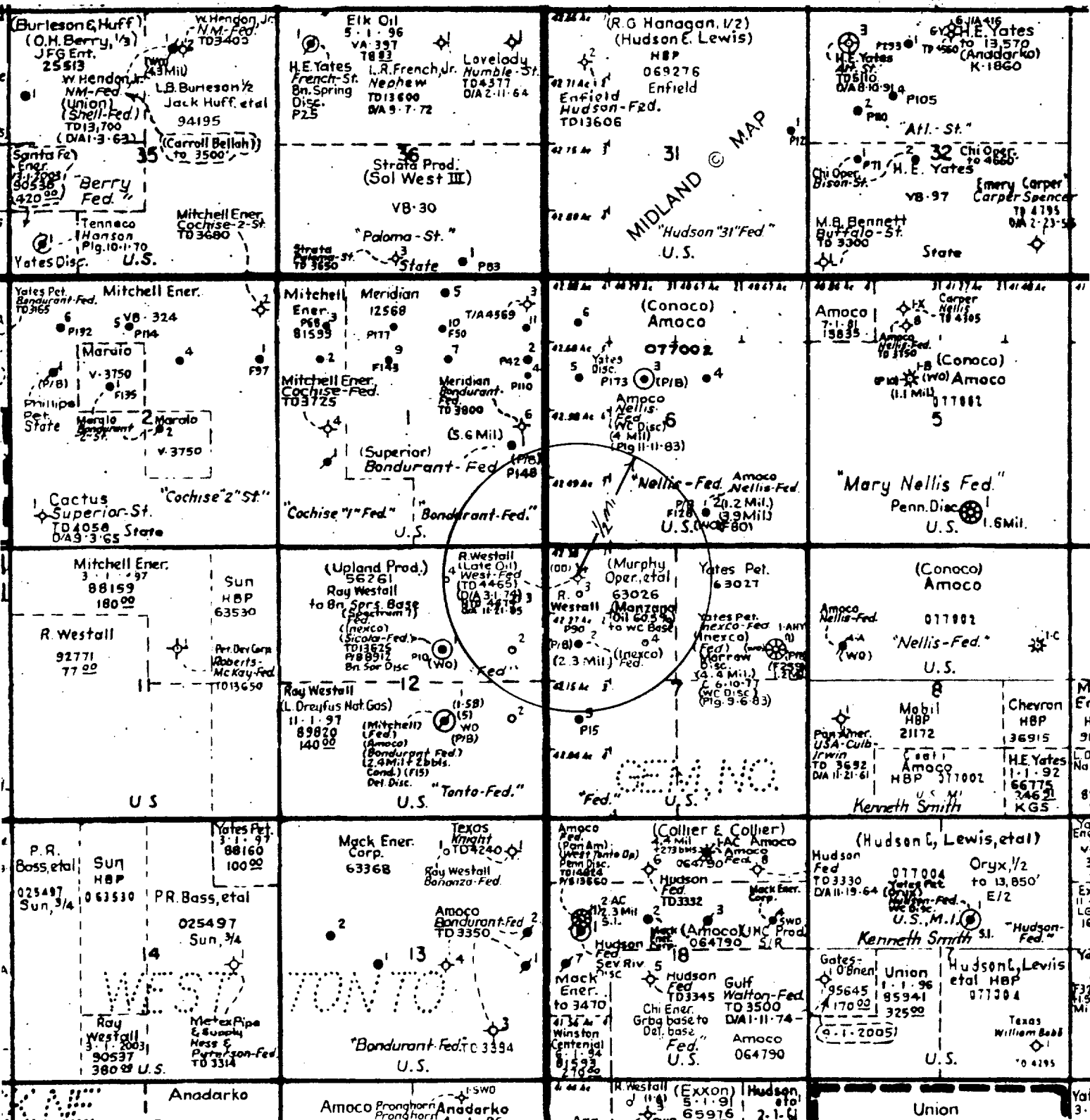
Tubing size 2 7/8" lined with plastic set in a BAKER LOC-SET packer at 3400'

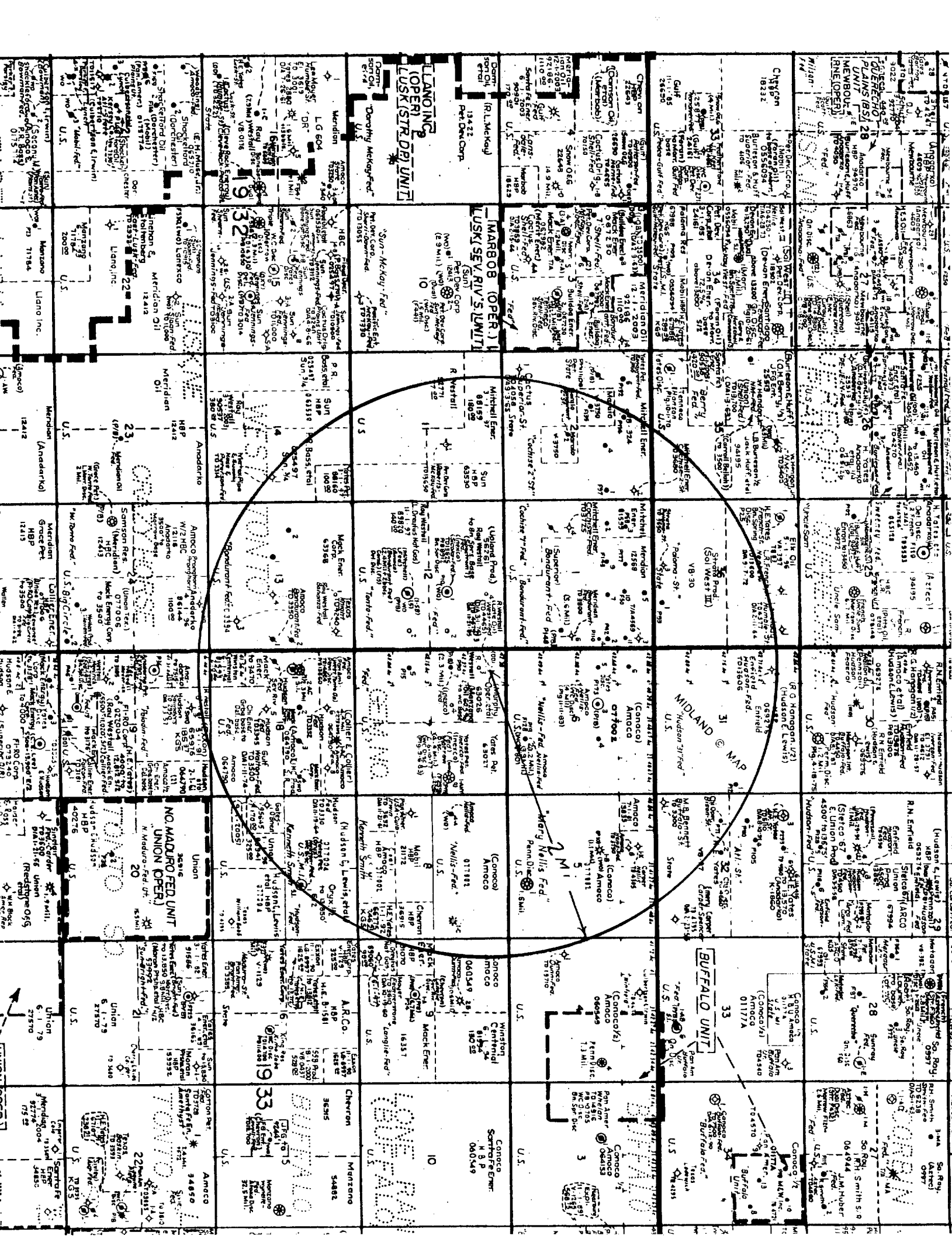
Other Data

1. Name of the injection formation: YATES, SEVEN RIVERS, QUEEN
2. Name of Pool: WILDCAT
3. Original purpose of well: EXPLORATORY OIL & GAS
4. Well has not been perforated in any other zone
5. The TONTO DELAWARE pool underlies this area approximately 6000'

ATTACHMENT V

Maps that identifies all wells of public record within two miles of each proposed injection well, and the area of review one-half mile radius around each proposed injection well.





ATTACHMENT VI

Data on all wells of public record within the area of review
with schematic of plugged wells.

Well name	Location	Spud date	Sur. Casing	Int. Casing	Prod. Casing	Completion
Ray Westall Federal 12 #2	SENE Sec 12 T19S-R32E	7/14/95	13 3/8" @ 450 475 sxs Circ.	8 5/8" @ 3069 1200 sxs Circ.	5 1/2" @ 7590 860 sxs T/2500	7403-7460 Tonto Delaware
Ray Westall Federal 12 #4	NWNE Sec 12 T19S-R32E	10/21/95	13 3/8" @ 455 475 sxs Circ.	8 5/8" @ 3000 1200 sxs Circ.	5 1/2" @ 7750 1390 sxs T/2000	7403-7460 Tonto Delaware
Ray Westall Federal 7 #5	NWSE Sec 7 T19S-R33E	11/4/93	13 3/8" @ 454 250 sxs Circ.	8 5/8" @ 3133 1200 sxs Circ.	5 1/2" @ 7678 1150 sxs Circ.	7269-7548 Tonto Delaware
Ray Westall Federal 7 #2	SWNW Sec 7 T19S-R33E	1/18/79	13 3/8" @ 509 485 sxs Circ.	8 5/8" @ 5104 2500 sxs Circ.	5 1/2" @ 13800 225 sxs @ 13800 175 sxs sq @ 5210	7426-7521 Tonto Delaware

ATTACHMENT VII

PROPOSED OPERATION

1. Plans are to inject 150-200 bbls of produced water per day per well.
2. The injection system is be a closed system.
3. The estimated injection pressure is 300 psig. Maximum pressure will be 600 psig.
4. Injection fluid will be reinjected produced water.
5. A sample of produced water is attached.

#01W052

BJ SERVICES COMPANY
WATER ANALYSIS #FW01W052
ARTESIA LAB

GENERAL INFORMATION

OPERATOR:	RAY WESTALL OPERATING	DEPTH:	7376-7386
WELL:	MAVERICK FEDERAL #1	DATE SAMPLED:	04/04/96
FIELD:		DATE RECEIVED:	04/04/96
SUBMITTED BY:	RANDY HARRIS	COUNTY:	EDDY
WORKED BY:	CRAIG BAILEY	STATE:	NM
PHONE NUMBER:		FORMATION:	

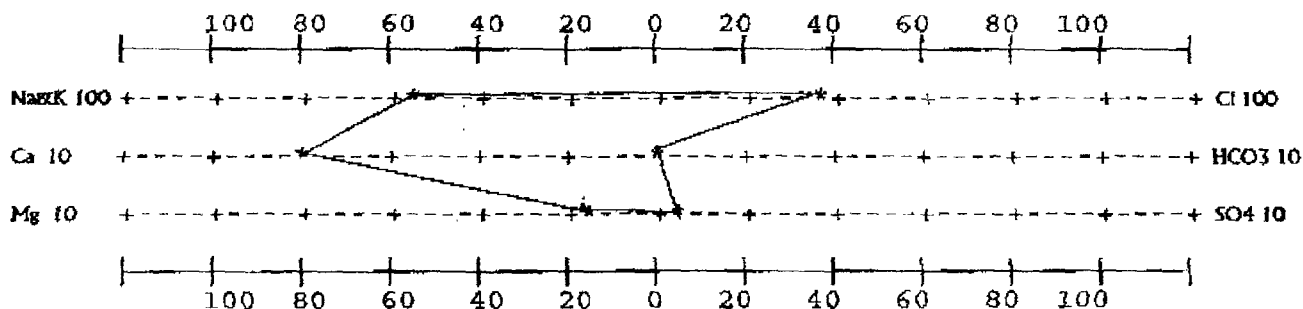
SAMPLE DESCRIPTION

PHYSICAL AND CHEMICAL DETERMINATIONS

SPECIFIC GRAVITY:	1.165	@ 70°F	PH:	5.55
RESISTIVITY (CALCULATED):	0.025	ohms @ 75°F		
IRON (FE++) :	65 ppm	SULFATE:		1,030 ppm
CALCIUM:	16,153 ppm	TOTAL HARDNESS		48,956 ppm
MAGNESIUM:	2,086 ppm	BICARBONATE:		178 ppm
CHLORIDE:	130,443 ppm	SODIUM CHLORIDE (Calc)		214,578 ppm
SODIUM+POTASS:	84,610 ppm	TOT. DISSOLVED SOLIDS:		265,217 ppm
IODINE:		POTASSIUM CHLORIDE:		

REMARKS

STIFF TYPE PLOT (IN MEQ/L)



ANALYST

Craig Bailey
 CRAIG BAILEY

BJ SERVICES COMPANY
WATER ANALYSIS #AT01W013
ARTESIA LAB

GENERAL INFORMATION

OPERATOR: RAY WESTALL	DEPTH:
WELL: PALADIN FED. #1	DATE SAMPLED: 05/07/96
FIELD:	DATE RECEIVED: 05/07/96
SUBMITTED BY: RANDY HARRIS	COUNTY: EDDY STATE: NM
WORKED BY: ERIC HENDERSON	FORMATION: DELEWARE
PHONE NUMBER:	

SAMPLE DESCRIPTION

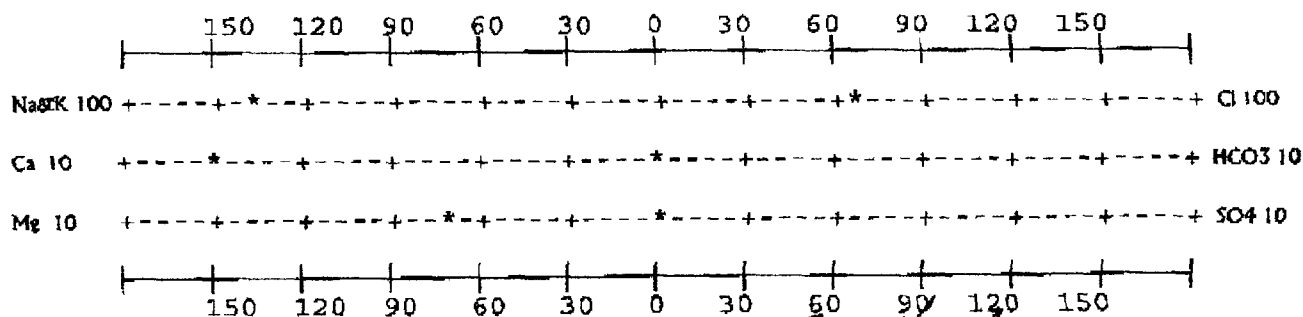
flow back sample

PHYSICAL AND CHEMICAL DETERMINATIONS

SPECIFIC GRAVITY:	1.165	@ 77°F	PH:	6.50
RESISTIVITY (CALCULATED):	0.015	ohms @ 75°F		
IRON (FE++) :	30 ppm	SULFATE:		343 ppm
CALCIUM:	29,901 ppm	TOTAL HARDNESS		111,655 ppm
MAGNESIUM:	8,969 ppm	BICARBONATE:		157 ppm
CHLORIDE:	240,289 ppm	SODIUM CHLORIDE (Calc)		395,276 ppm
SODIUM+POTASS:	141,462 ppm	TOT. DISSOLVED SOLIDS:		493,907 ppm
H2S: NO TRACE		POTASSIUM CHLORIDE:		450

REMARKS

STIFF TYPE PLOT (IN MEQ/L)



ANALYST

Eric Henderson
 ERIC HENDERSON

ATTACHMENT VIII

The proposed injection zones are sands of the Yates Seven Rivers and Queen Formations. These sands are composed of fine-grained quartz sand with varying amounts of shales. They have varying thickness from 8-30 feet thick. There is possible drinking water overlying the injection in the surface sands at a depth of 0-250'. There is no known source underlying the injection interval.

ATTACHMENT X

Logging and test data on subject well.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-63026

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Tonto West 7 Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat (Queen-Penrose Test)

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

W $\frac{1}{2}$ Sec. 7, T-19S, R-33E

14. PERMIT NO.

15. ELEVATIONS (Show whether DP, RT, GR, etc.)

3665.3' G.R.

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

10. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

11-11-85 RU Logging Truck. TIH w/Gamma Ray CCL. Loggers TD @ 4628', PBTD @ 4637'. TIH w/perf guns & perf. as follows: 4424', 4425', 4426' & 4427' @ 1 J.S.P.F. (Penrose). Perf. Queen as follows: 4165', 4167', 4171', 4183', 4184', 4192' (Queen). RD Logging Truck. Tally & TIH w/144 jts. 2-7/8" tbg. to 4430'. Spotted 2 bbls. acid across perfs. Layed dn. 4 jts. of 2-7/8" tbg. Set pkr. RTTS @ 4328' K.B.M. Broke Penrose dn. @ 2200# psi. RU Swabb line & swabbed tbg. dry to seat nipple. RU Halliburton to complete acid job as follows:

500 gals. 15% NEFE

Dropped 10 Ball sealers (Well balled off)

Flushed w/27.8 bbls. 2% KCl wtr.

Avg. Press @ 2000# psi and Max. Press @ 3800# psi

Avg. RPM @ 3.5 bbls./min. and Max. RPM @ 3.6 bbls./min.

ISIP @ 1400# psi, 5 Min. @ 1100# psi, 10 min @ 700# psi

11-15-85 RU Halliburton. Spotted 2 bbls. 15% MCA Acid @ 4200' K.B.M. Layed dn. 5 jts. 2-3/8" tbg. Nippled dn. B.O.P. Set RTTS @ 4048'. Broke perfs @ 2200# psi. Swabbed tbg. to S.N. Completed acid job as follows:

CONTINUED ON PAGE 2 - OVER

I hereby certify that the foregoing is true and correct

SIGNED

Lois N. Brown
Lois N. Brown

TITLE Production Records

DATE November 20, 1985

(This space for Federal or State office use)

APPROVED FOR RECORD

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

Nov 22 1985
NOV 22 1985

*See Instructions on Reverse Side

CONFIDENTIAL

Form 3160-5
November 1983
Formerly 9-331UNIT STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTSUBMIT IN TRIPLICATE
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-63026

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

West 7 Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Section 7, T-19S, R-33E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

MURPHY OPERATING CORPORATION

3. ADDRESS OF OPERATOR

P. O. Drawer 2648, Roswell, New Mexico 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)

At surface

660' FNL & 660' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3665.3 G.R.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☒(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

11-24-85 Unseated pump, TIH & TOH w/rods & pump. Nippled dn. WH. Layed dn. 2 jts. 2-3/8" tbg. SLM out of hole w/RRTS pkr. Layed dn. same. RU loggers & TIH to 4155' & set CIBP & dumped 10' cmt. on top. RU perf. guns & TIH & perf. @ 3967' - 3977' @ 1 JSPF = 11 holes total. RD loggers (PBDT @ 4145'). TIH w/new RTTS pkr. to 3980' & spotted 2 bbls. 15% MCA acid. Layed dn. 4 jts. of 2-7/8" tbg. Set RTTS pkr. @ 3865'. Broke dn. perfs, swabbed tbg. dry. Well broke dn. @ 2200# psi. Completed acid job as follows: 666 gals. 15% MCA acid; 22 ball sealers, well balled off; Max. press 3500# psi., Avg. Press @ 2000# psi.; Max. rate @ 3.8 BPM, Avg. rate @ 3.0 BPM.; Flushed w/25 bbls. 2% KCl wtr. Total bbls. to recover = 44 bbls. ISIP 1200#, 5 min. 75# psi, 10 min. 0# psi. RU lubricator & made 10 swabb runs. F.L. remaining @ 1200' from surface. Recovered 46 bbls. All loadwater recovered. SDFN.

11-26-85 SITP @ 10# psi @ 13 hrs. No show of gas. RU lubricator & started swabbing @ 7:05 a.m. RD swabb lubricator, changed elev. & TIH w/pump & rods as follows: 2-1/2" X 2" X 12' - RWTC Pump; 2' X 3/4" rod sub, top of pump; 3/4" rods; 22' X 1-1/4" polish rod, 10' X 1-1/2" liner. Started motor & left running w/good pump action. Pumping water, no show of oil or gas.

18. I hereby certify that the foregoing is true and correct

SIGNED

Lois N. Brown
Lois N. Brown

TITLE Production Clerk

DATE Dec. 3, 1985

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

LMC

DEC 11 1985

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-63026	
2. NAME OF OPERATOR MURPHY OPERATING CORPORATION		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Drawer 2648, Roswell, New Mexico 88201		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FNL & 660' FWL (Unit Ltr. D)		8. FARM OR LEASE NAME West 7 Federal	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3665.3' G.R.		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 7, T-19S, R-33E	
		12. COUNTY OR PARISH Lea	13. STATE New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

12-3-85 RU PU.

12-4-85 Unseated pump & TIH & TOH w/rods & layed dn. pump. Nippled dn WH, changed elev. & unseated pkr. RTTS, let fluid equalize. Layed dn. 3 jts. of 2-7/8" tbg. TOH for CIBP & perf. RU loggers & TIH w/CIBP & set CIBP @ 3960' & dumped 10' cmt. on top. TIH w/perf. guns & perf. as follows: 3759'-3766' @ 1 J.S.P.F. for a total of 8 holes. RD loggers & TIH w/2-7/8" tbg. to 3770' & spotted w/2 bbls. 15% MCA acid. Layed dn. 3 jts. 2-7/8" tbg. & set RTTS pkr. @ 3684.51'. Broke dn. perfs. & swabbed tbg. dry. Completed acid job as follows: Well broke dn. @ 3700# psi; 666 gals. 15% MCA acid; 16 ball sealers (well balled off); Max. press. @ 4300# psi. - Avg. press @ 2534# psi; Max. rate = 4.1 BPM - Avg. rate - 3.5 BPM; flushed w/2% KCl - 23 bbls.; Total bbls. to rec. - 40 bbls.; ISIP 2450# psi, 5 min, 1540# psi, 10 min 1100# psi.; 15 min. well flowed dn. RU lubricator & made 4 swabb runs to S.N. Rec. 24 bbls. - 16 bbls. left to rec. SDFN.

12-5-85 SITP @ 50# psi. for 13.5 hrs. Opened 1" bleed line dn. 1" hose. Tried to burn, no show of gas. RU lubricator & started swabbing @ 7:30 a.m. Tank

CONTINUED ON PAGE 2

18. I hereby certify that the foregoing is true and correct

SIGNED Lois N. Brown TITLE Production Clerk DATE December 9, 1985

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:
ACCEPTED FOR RECORD

DEC 11 1985

*See Instructions on Reverse Side

Form 3160-5
November 1983)
Formerly 9-331)

UNIT STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY
SUBMIT IN TRIPLIC
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
NM-63026

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

West 7 Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR BLK. AND
SURVEY OR ARRA

Sec. 7, T-19S, R-33E

12. COUNTY OR PARISH
Lea

13. STATE
New Mexico

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL ☒ GAS ☐ OTHER ☐
WELL WELL

2. NAME OF OPERATOR

MURPHY OPERATING CORPORATION

3. ADDRESS OF OPERATOR

P. O. Drawer 2648, Roswell, New Mexico 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)

At surface

660' FNL & 660' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, AT, GH, etc.)

3665.3 G.R.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

12-17-85 TIH & unseated pump & TOH w/rods & pump. Nippled dn. WH, changed elev., unseated pkr. RTTS, & let fluid equalize. Layed dn. 3 jts. 2-7/8" tbg. TOH w/SLM & set CIBP & perf. RU loggers, TIH w/CIBP & set @ 3750'. Dumped 10' cmt. top of CIBP. TIH w/perf guns & perf. as follows: 3586' - 3591', 1 J.S.P.F. = 6 holes. RD loggers. TIH w/2-7/8" tbg. to 3591.92' & spotted 2 bbls. 15% MCA acid. Layed dn. 3 jts. 2-7/8" tbg. & set RTTS @ 3489.24'. Break dn. perf. @ 3500# psi. Swabbed tbg. dry. Completed acid job as follows: 666 gals 15% MCA acid, 12 ball sealers (well did ball off). Max. press. @ 4000# psi, Avg. press. @ 2200# psi. Max. RPM @ 4.5 & Avg. RPM @ 3.2. Flushed w/22.5 bbls. 2% KCl water. ISIP @ 1400# psi, 5 min. @ 750# psi., 10 min @ 500# psi. 15 min. well blown dn. Total bbls. to rec. = 38.6 bbls. RU lubricator & started swabbing & made 9 swabb runs. Rec. 24 bbls. acid water & 15 bbls. left to rec.

12-18-58 13.5 hrs. S.I.T.P. 10# psi. RU lubricator & started swabbing. No show of oil or gas. Layed dn. swabb lubricator, RU rod elev. & TIH w/rods as follows: 2 X 1 1/2" X 12' - Pump w/2 1/2" cups; 1 2' X 3/4" sub; 137 3/4" rods; 1 8' X 3/4"; 1 6' X 3/4"; 1 4' X 3/4"; 22' X 1-1/4" polish rod w/10' X 1-1/2" liner. Left well pumping.

I hereby certify that the foregoing is true and correct

SIGNED Lois N. Brown

TITLE Production Clerk

DATE Dec. 30, 1985

(This space for Federal or State office use)

APPROVED BY ACCEPTED FOR RECORD

TITLE

DATE

JAN 2 1986

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
OPERATORS COPY

SUBMIT IN TRIPlicate
(Other instructions on
reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR MURPHY OPERATING CORPORATION		8. FARM OR LEASE NAME West 7 Federal	
3. ADDRESS OF OPERATOR P. O. Drawer 2648, Roswell, New Mexico 88201		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FNL & 660' FWL		10. FIELD AND POOL, OR WILDCAT Wildcat	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 7, T-19-S, R-33E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3665.3 G.R.		12. COUNTY OR PARISH Lea	
		13. STATE New Mexico	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☒
(Other) ☐

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

1-9-86 RU PU & unseated pump; TIH & TOH w/same. Nippled dn. WH, changed elev. & layed dn. 6 jts. 2-7/8" tbg. TOH to set CIBP & perf. RU loggers, TIH w/CIBP, set CIBP @ 3580'. Dumped 10' cmt. on top CIBP. TIH w/perf. guns & perforated as follows: 3481'-1 shot, 3484'-3490'-J.S.P.F. = 7 shots, 3494'-3496' = 1 J.S.P.F. = 3 shots. Total - 11 holes. Picked up RTTS pkr., TIH w/2-7/8" tbg. to 3497' & spotted 2 bbls. 15% MCA acid. Layed dn. 4 jts. 2-7/8" tbg. Set RTTS pkr. @ 3368.53' = K.B. Breakdn. perms w/1950# psi. Swabbed tbg. dry. Completed acid job as follows: 916 gals. 15% MCA acid; 25 ball scalers (well did ball off); Max. press. @ 4300# psi; Avg. press. @ 1963# psi; Max. RPM @ 5.1 bbls./min.; Avg. RPM @ 4.3 bbls./min.; flushed w/22.5 bbls. of 2% KCl wtr.; ISIP @ 1750# psi; 5 min. @ 1680# psi; 10 min. @ 1660# psi. Total bbls. to rec. - 45 bbls. Rig swabb line, drum was torn up.

1-10-86 SITP @ 15# psi. 14 hrs. Blew dn. 2 min. Changed elev., picked up pump & TIH w/rods as follows:

109 jts. 2-7/8" tbg.	3360.00'
RTTS pkr.	7.43'
seat nipple	1.10'
KB measurement	3368.53'

Pump 2-1/2" X 2" X 12'; One 2' X 3/4" rod sub, top of pump; 133 3/4" rods; Two 6' X 3/4" rod sub; Two 4' X 3/4" rod sub; 1-1/4" X 22' polish rod w/1-1/2" X 10' liner. Started engine & left well pumping w/good pump action. Tbg. full, pumped fluid to tank.

18. I hereby certify that the foregoing is true and correct

SIGNED Lois N. Brown TITLE Production Clerk DATE January 14, 1986

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

JAN 16 1986

*See Instructions on Reverse Side

ATTACHMENT XI

There is no fresh water wells within one mile.

ATTACHMENT XII

All available geologic and engineering data have been examined and there is no evidence of open faults or any other hydrologic connection between the disposal zone and any source of drinking water.

ATTACHMENT XIV

PROOF OF NOTICE

Leasehold operators within one-half mile of the well location are Meridian, Amoco and Yates Petroleum. Each of these operators were provided a copy of our application by certified mail. Proof of notice is enclosed. The surface owner is B.L.M.

PROOF OF PUBLICATION

Proof of publication will be from the Hobbs Sun News and will be forwarded.

Copies of this application has been sent to:

Meridian
21 Desta Dr.
Midland, Tx. 79701

Certified Mail # P 333 336 222

Yates Petroleum Corp.
105 S. 4th Street
Artesia, NM. 88210

Certified Mail # P 333 336 223

Amoco
501 Westlake Pk Blvd
Houston, Tx. 77253

Certified Mail # P 333 336 224

Oil Conservation Division
P.O. Box 1980
Hobbs, NM. 88241-1980

Oil Conservation Division
2040 So. Pacheco St.
Santa Fe, NM 87505-5472

SURFACE OWNER

Bureau of Land Management
620 E. Greene Street
Carlsbad, NM 88220-6292

P 333 336 223

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Sent to		YATES Petroleum	
Street & Number		105 S. 4th	
Post Office, State, & ZIP Code		ARRESA, NM 88210	
Postage	\$ 1.24		
Certified Fee	1.10		
Special Delivery Fee			
Restricted Delivery Fee			
Return Receipt Showing to Whom & Date Delivered			
Return Receipt Showing to Whom, Date, & Addressee's Address	1.10		
TOTAL Postage & Fees		\$ 3.44	
Postmark or Date		LOCO HILLS, NM MAY 9 1996	

PS Form 3800, April 1995

P 333 336 224

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Sent to		Amoco	
Street & Number		501 WEST LAKE BLVD	
Post Office, State, & ZIP Code		Houston, TX 77253	
Postage	\$ 1.24		
Certified Fee	1.10		
Special Delivery Fee			
Restricted Delivery Fee			
Return Receipt Showing to Whom & Date Delivered			
Return Receipt Showing to Whom, Date, & Addressee's Address	1.10		
TOTAL Postage & Fees		\$ 3.44	
Postmark or Date		LOCO HILLS, TX MAY 9 1996	

PS Form 3800, April 1995

P 333 336 222

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Sent to		MEDIAN	
Street & Number		21 DESTA DR.	
Post Office, State, & ZIP Code		Midland, TX 79701	
Postage	\$ 1.24		
Certified Fee	1.10		
Special Delivery Fee			
Restricted Delivery Fee			
Return Receipt Showing to Whom & Date Delivered			
Return Receipt Showing to Whom, Date, & Addressee's Address	1.10		
TOTAL Postage & Fees		\$ 3.44	
Postmark or Date		LOCO HILLS, TX MAY 9 1996	

PS Form 3800, April 1995

AFFIDAVIT OF PUBLICATION

State of New Mexico,
County of Lea.

I, Kathi Bearden

Publisher

of the Hobbs Daily News-Sun, a daily newspaper published at Hobbs, New Mexico, do solemnly swear that the clipping attached hereto was published once a week in the regular and entire issue of said paper, and not a supplement thereof for a period.

of _____

1 weeks.

Beginning with the issue dated

March 3, 1996

and ending with the issue dated

March 3, 1996

Kathi Bearden
Publisher

Sworn and subscribed to before

me this 18th day of

March, 1996

Marilyn D. Ruffino
Notary Public.

My Commission expires

March 24, 1998

(Seal)

LEGAL NOTICE
March 3, 1996

Ray Westall-Operator, P.O. Box 4, Loco Hills, New Mexico 88255. Phone (505) 877-2370. Contact party for Ray Westall-Operator, Randall L. Harris, is seeking administrative approval from the New Mexico Oil Conservation Division to Utilize a well Located, 660' FNL & 660' FWL, Section 7, Township 19 South, Range 33 East, Lea County, New Mexico for salt water disposal. Proposed injection is in the Yates, Seven Rivers, Queen Formations through perforations 3586-4427. Expected maximum injection rate of 200 BBLs per day, at 400 PSI. Interested parties must file objections or requests for hearing with the Oil Conservation Division. P.O. Box 2088, Santa Fe, New Mexico 87501, Within 15 days of this notice.
#14422

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 publication has been made.