

6/10/98 | 6/25/98 | - BS | - KW | - SWD #10

ABOVE THIS LINE FOR DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION
- Engineering Bureau -

ADMINISTRATIVE APPLICATION COVERSHEET

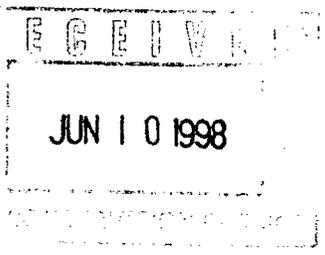
THIS COVERSHEET IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS

Application Acronyms:

- [NSP-Non-Standard Proration Unit] [NSL-Non-Standard Location]
- [DD-Directional Drilling] [SD-Simultaneous Dedication]
- [DHC-Downhole Commingling] [CTB-Lease Commingling] [PLC-Pool/Lease Commingling]
- [PC-Pool Commingling] [OLS - Off-Lease Storage] [OLM-Off-Lease Measurement]
- [WFX-Waterflood Expansion] [PMX-Pressure Maintenance Expansion]
- [SWD-Salt Water Disposal] [IPI-Injection Pressure Increase]
- [EOR-Qualified Enhanced Oil Recovery Certification] [PPR-Positive Production Response]

[1] TYPE OF APPLICATION - Check Those Which Apply for [A]

- [A] Location - Spacing Unit - Directional Drilling
- NSL NSP DD SD



Check One Only for [B] or [C]

- [B] Commingling - Storage - Measurement
- DHC CTB PLC PC OLS OLM
- [C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery
- WFX PMX SWD IPI EOR PPR

[2] NOTIFICATION REQUIRED TO: - Check Those Which Apply, or Does Not Apply

- [A] Working, Royalty or Overriding Royalty Interest Owners
- [B] Offset Operators, Leaseholders or Surface Owner
- [C] Application is One Which Requires Published Legal Notice
- [D] Notification and/or Concurrent Approval by BLM or SLO
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office
- [E] For all of the above, Proof of Notification or Publication is Attached, and/or,
- [F] Waivers are Attached

[3] INFORMATION / DATA SUBMITTED IS COMPLETE - Statement of Understanding

I hereby certify that I, or personnel under my supervision, have read and complied with all applicable Rules and Regulations of the Oil Conservation Division. Further, I assert that the attached application for administrative approval is accurate and complete to the best of my knowledge and where applicable, verify that all interest (WI, RI, ORRI) is common. I further verify that all applicable API Numbers are included. I understand that any omission of data, information or notification is cause to have the application package returned with no action taken.

Note: Statement must be completed by an individual with supervisory capacity.

J. RAY STEWART J. Ray Stewart OPERATOR 5-21-98
 Print or Type Name Signature Title Date

APPLICATION FOR AUTHORIZATION TO INJECT

I. Purpose: Secondary Recovery Pressure Maintenance Disposal Storage
 Application qualifies for administrative approval? yes no

II. Operator: J. RAY STEWART

Address: P. O. BOX 451, MIDLAND, TEXAS 79701

Contact party: J. RAY STEWART Phone: (915) 687-1086

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: J. RAY STEWART Title OPERATOR

Signature: *J. Ray Stewart* Date: 5-21-98

* 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.

J. RAY STEWART
POKER LAKE STATE #1 WELL (M-8-T25S, R30E)
CORRAL CANYON (DELAWARE) FIELD
EDDY COUNTY, NEW MEXICO

APPLICATION FOR AUTHORITY TO INJECT

MAIL LIST

1. Oil Conservation Division
P. O. Box 2088
Sante Fe, New Mexico 87501-2088
2. Oil Conservation Division
P. O. Drawer DD
Atresia, New Mexico 88210

SURFACE OWNER

3. Commission of Public Lands
New Mexico State Land Office
P. O. Box 1148
Sante Fe, New Mexico 87504-1148
Cert #P497382553

SURFACE TENANT

4. J.R. Engineering and Construction Co.
P. O. Box 6741
Odessa, Texas 79762

LEASEHOLD OPERATORS WITHIN AREA OF REVIEW

5. E/2 Sec. 7, T25S, R30E,
(Mary R. Lowe)
Maralo, Inc.
223 W. Wall St.
Midland, Texas 79701
Cert #P497382552
6. W/2 SW/4 and S/2 NW/4 Sec. 8,
NW/4 NW/4 Sec. 17 and
NE/4 NE/4 Sec. 18, T25S, R30E,
Calvin F. Tennison
2401 Martin Lane
Carlsbad, New Mexico 88220
Cert #P497382551
7. NE/4 SW/4 SEC. 8, T25S, R30E
Robert H. Forrest, Jr.
414 S. Canal St.
Carlsbad, New Mexico 88220
Cert #P497382546
8. NW/4 SE/4 Sec. 8, T25S, R30E
Mobil Exploration & Producing U.S. Inc.
550 W. Illinois Av., Suite 100
Midland, Texas 79701
Cert #P497382550

9. SE/4 SW/4 AND SW/4 SE/4 Sec. 8, NE/4 NW/4 Sec. 17 and SE/4 NE/4 Sec. 18, T25S, R30E Cert #P497382549
Tempo Energy, Inc.
P. O. Box 1034
Midland, Texas 79702-1034
10. NW/4 NE/4 and SE/4 NW/4 Sec. 17 and NW/4 NE/4 Sec. 18, T25S, R30E Cert #P080144321
Bass Enterprises Production Co.
6 Desta Drive
Midland, Texas 79705
11. SW/4 NW/4 Sec. 17, T25S, R30E
J. Ray Stewart
P. O. Box 451
Midland, Texas 79702
-

VI. Table of wells (8) within area of review and schematics of P&A wells (2) are attached.

VII. Data on proposed operation:

1. Average Rate - 450 BWPD (initially, est. 400 BWPD)
Maximum Rate - 500 BWPD
2. Closed system
3. Average injection pressure - 400 psi
Maximum injection pressure - 650 psi
4. Water sources - Delaware oil zone produced water
5. N/A

VIII. Proposed injection zone is a Delaware age sandstone at approximate depth of 3700' with a gross thickness of about 50'. Fresh water in this area occurs from about 275' to 700' in Red Bed stringers.

IX. Proposed stimulation, if necessary, is 1000 gals. of 15% HCL acid.

X. Logs have been filed with the OCD.

XI. N/A (no fresh water wells within one mile of proposed water disposal well).

XII. Applicant attests that examination of all available geologic and engineering data indicates that no hydrologic connection exists between the proposed injection interval and overlying fresh water zones, noted above (VIII).

XIII. Proof of notice in an area newspaper and to lease operators within one-half mile are attached.

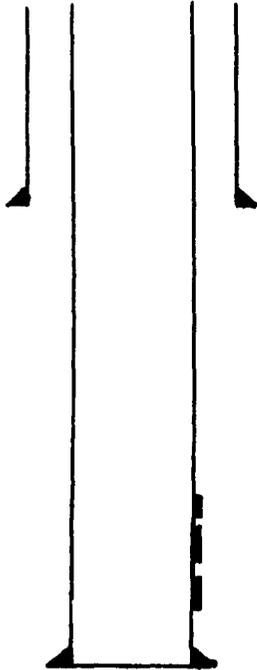
INJECTION WELL DATA SHEET

OPERATOR - J. RAY STEWART

LEASE & WELL - POKER LAKE STATE #1

LOCATION - UNIT M, 664' FSL & 667' FWL, S8, T25S, R30E, EDDY CO., NEW MEXICO

SCHEMATIC



TABULAR DATA

Surface Csg.

Size - 8-5/8" cmt. w/400sx

12-1/4" Hole

TOC - Surface (calc.) 12-1/4" Hole

8-5/8", 24# csg. @
565' w/400 sx.
(circ. est.)

Long String Csg.

Size - 5-1/2" cmt. w/1100 sx.

7-7/8" Hole

TOC - Surface (calc.) 7-7/8" hole

Perfs (holes)

3649' - 50' (2)

3652' - 61' (10)

3672' - 79' (16)

TD - 3692'

5-1/2", 14#, J-55, T&C csg.

Proposed Injection Interval:

@ 3692' w/1100 sx. (circ. est.)

Perfs 3649' - 3679' (Delaware)

TD-3692'

Proposed: 2-3/8" internally plastic coated tubing with Baker-Elder lockset (Nickel plated internally and externally) packer at 3600'±

Other Data

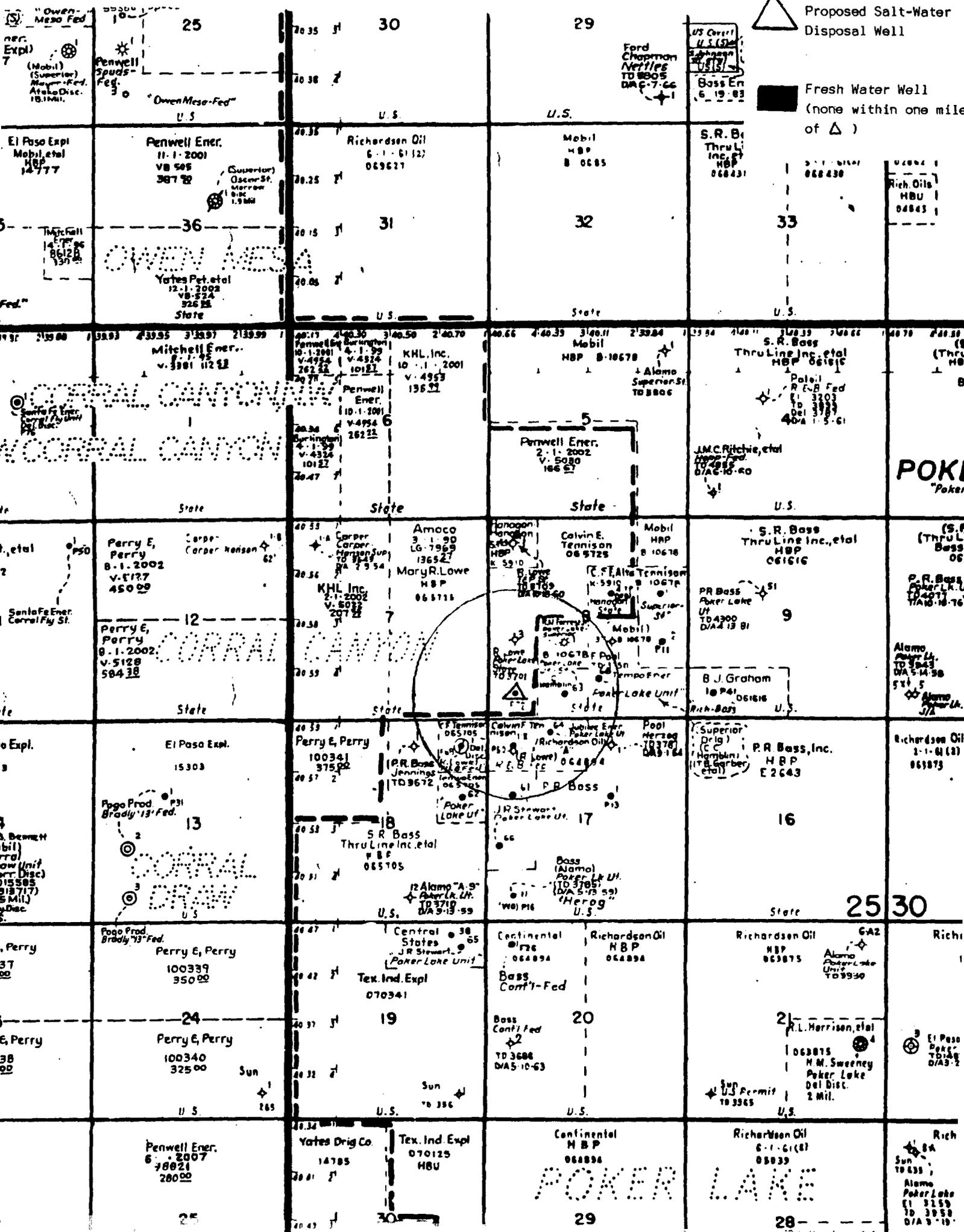
1. Name of injection formation - Delaware
2. Name of Field or Pool - Corral Canyon: Delaware
3. Is this a new well drilled for injection? No
If no, for what purpose was the well originally drilled? Delaware Oil Well completed 5/24/60.
4. Has the well ever been perforated in any other zone? No
5. Give the depth to and name of any overlying and/or underlying oil or gas zones (pools) in this area. None



Proposed Salt-Water Disposal Well



Fresh Water Well (none within one mile of Δ)



Owen-Mesa Fed
nec. Expt
7
(Mobil)
(Superior)
Mayer-Fed
Atlas Dist.
18.1941.

El Paso Expt
Mobil, et al
HBP
14777

5
Yates Pet. et al
12.1.2002
VB-524
92625
State

3937 21900
3393 43955 31597 21399
Mitchell Ener.
11.1.95
v.3981 11222

2
Santa Fe Ener.
Cornell/Fly Unit
P.L. Dist.

et. et al
32
Perry E. Perry
B-1-2002
v.1127
45009

1
Santa Fe Ener.
Cornell/Fly St.

El Paso Expt.
15303

14
A.B. Bennett
(Mobil)
Corral
Draw Unit
Morr. Dist.
1015585
1013717
9.5 Mil
Morr. Dist.
18.1941.

E. Perry
337
000

3
y E. Perry
338
000

Penwell Ener.
6-1-2007
78821
28000

6

25
Penwell Spuds
Fey
"Owen-Mesa-Fed"
U.S.

Penwell Ener.
11-1-2001
VB 505
38778
(Superior)
(Oscor) Sp.
Morr. Dist.
18.1941.

36
Yates Pet. et al
12.1.2002
VB-524
92625
State

Mitchell Ener.
11.1.95
v.3981 11222

Perry E. Perry
B-1-2002
v.1127
45009

Perry E. Perry
B-1-2002
v.5128
58438

El Paso Expt.
15303

13
Pogo Prod.
Brady 13 Fed.

Perry E. Perry
100339
35000

Perry E. Perry
100340
32500 Sun

Penwell Ener.
6-1-2007
78821
28000

25

30
7035 J
7038 J
U.S.

Richardson Oil
6-1-61(2)
069627

31
7015 J
7008 J
U.S.

KHL Inc.
10-1-2001
v.4953
13622

6
Penwell Ener.
10-1-2001
v.4954
28222

Amoco
3-1-99
LG-1969
136527

Mary R. Lowe
HBP
065711

Perry E. Perry
100341
37500
P.R. Bass
Jennings
103672

18
S.R. Bass
Thru Line Inc. et al
HBP
065705

Central States
38
05
J.R. Stewart
Poker Lake Unit

19
7037 J
7032 J
Sun
70396

Yates Drig Co.
14785
7001 J

30

29
Ford
Chapman
Nettles
TD 8805
DAE-7-66

Mobil
HBP
B 0685

32
State

Mobil
HBP
B-10678

5
Penwell Ener.
2-1-2002
v.5080
18667

Calvin E. Tennis
069725

C.F. Alta Tennis
K-5910
B-10678
Morr. Dist.
18.1941.

Richardson Oil
HBP
064894

17
J.R. Stewart
Poker Lake Unit

Continental
HBP
064894

Bass
Cont'l-Fed
2
TD 3686
DAE-10-63

Continental
HBP
064894

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S.R. Bass
Thru Line Inc. et al
HBP
068431

33
U.S.

S.R. Bass
Thru Line Inc. et al
HBP
068430

9
J.M.C. Ritchie, et al
HBP
DAE-10-60

S.R. Bass
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HBP
061616

B.J. Graham
10 P41
061616
U.S.

P.R. Bass, Inc.
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E2643

16
Bass (Alamo)
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103705
(DAE-5-13-59)
"Herog"
U.S.

Richardson Oil
HBP
063875

21
L. Harrison, et al
106875
M.M. Sweeney
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Oil Dist.
2 Mil.

Richardson Oil
6-1-61(2)
06839

28

Rich. Oils
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04843

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S.R. Bass
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U.S.

S.R. Bass
Thru Line Inc. et al
HBP
061616

9
J.M.C. Ritchie, et al
HBP
DAE-10-60

S.R. Bass
Thru Line Inc. et al
HBP
061616

B.J. Graham
10 P41
061616
U.S.

P.R. Bass, Inc.
HBP
E2643

16
Bass (Alamo)
Poker Lake Unit
103705
(DAE-5-13-59)
"Herog"
U.S.

J. RAY STEWART
 POKER LAKE STATE #1 WELL (M-8-T25S, R30E)
 CORRAL CANYON (DELAWARE) FIELD
 EDDY COUNTY, NEW MEXICO

APPLICATION FOR AUTHORITY TO INJECT

WELLS (8) WITHIN AREA OF REVIEW

1. Ralph Lowe #3 Poker Lake State D&A
 Unit L, 660' FWL & 1580' FSL, S8, T25s, R30E

Completed 12/11/60 TD-3701' (Delaware)

| <u>Hole</u> <u>Size, in.</u> | <u>CSG</u> <u>Size, In.</u> | <u>CSG</u> <u>Depth, ft.</u> | <u>CMT</u> <u>Sx.</u> |
|---------------------------------|--------------------------------|---------------------------------|--------------------------|
| 12 1/4 | 8 5/8 | 658 | 400 (circ.) |
| 7 7/8 | Open hole to TD | | |

D&A 12/11/60 Schematic attached

2. Robert H. Forrest #1 Poker Lake Superior Oil
 Unit K, 1992' FSL & 2002' FWL, S8, T25S, R30E

Completed 7/12/60 TD-3750'

Perf. 3726' - 32' flowed salt water, set retainer 3712' (PBD),
 squeeze 85 sx. cmt., perf. 3698 - 3706' (Delaware SI gas well)

OWWO: 2/85 reperf 3698' - 3706' and perf. 3706' - 3712'
 (Delaware)

OWWO: 1984 SQ hole csg. at 710'

| <u>Hole</u> <u>Size, in.</u> | <u>CSG</u> <u>Size, In.</u> | <u>CSG</u> <u>Depth, ft.</u> | <u>CMT</u> <u>Sx.</u> |
|---------------------------------|--------------------------------|---------------------------------|--------------------------|
| 12 1/4 | 8 5/8 | 642 | 350 (circ.) |
| 7 7/8 | 5 1/2 | 3750 | 150 (top est. 2900') |

3. Tempo Energy, Inc. #68 Poker Lake Unit State Oil
 Unit O, 990' FSL & 2310' FEL, S8, T25S, R30E

Completed 1-27-86 TD-3767'

Perf. 3712' - 3742' (Delaware)

| <u>Hole</u> <u>Size, in.</u> | <u>CSG</u> <u>Size, In.</u> | <u>CSG</u> <u>Depth, ft.</u> | <u>CMT</u> <u>Sx.</u> |
|---------------------------------|--------------------------------|---------------------------------|--------------------------|
| 12 1/4 | 9 5/8 | 665 | 300 (circ.) |
| 7 7/8 | 5 1/2 | 3767 | 200 |

4. Tempo Energy, Inc. #63 Poker Lake Unit State Oil
 Unit N, 665' FSL & 2015' FWL, S8, T25S, R30E

Completed 1-24-84 TD-3738' PBD-3736'

Perf. 3687' - 3721' (Delaware)

| <u>Hole</u> <u>Size, in.</u> | <u>CSG</u> <u>Size, In.</u> | <u>CSG</u> <u>Depth, ft.</u> | <u>CMT</u> <u>Sx.</u> |
|---------------------------------|--------------------------------|---------------------------------|--------------------------|
| 12 1/4 | 9 5/8 | 674 | 300 (circ.) |
| 7 7/8 | 5 1/2 | 3738 | 150 |

5. Calvin F. Tennison #1 R&B Federal Oil
 Unit A, 664' FNL & 668' FEL, S18, T25S, R30E
 Completed 3-31-60 TD- 3666' PBD-3664'
 Perf. 3639.5' - 3645.5' (Delaware)

| Hole Size, in. | CSG Size, In. | CSG Depth, ft. | CMT Sx. |
|-------------------|------------------|-------------------|-------------|
| 12 1/4 | 8 5/8 | 683 | 400 (circ.) |
| 7 7/8 | 5 1/2 | 3666 | 780 |

P&A 5-24-94 Schematic attached

6. Calvin F. Tennison #1-Y R&B Federal Oil
 Unit D, 611' FNL & 614' FWL, S17, T25S, R30E
 Completed 6-23-60 TD-3708' PBD-3684'
 Perf. 3693' - 98', PBD - 3684', perf. 3668' - 75' (Delaware)

| Hole Size, in. | CSG Size, In. | CSG Depth, ft. | CMT Sx. |
|-------------------|------------------|-------------------|-------------|
| 12 1/4 | 8 5/8 | 775 | 300 (circ.) |
| 7 7/8 | 5 1/2 | 3708 | 320 |

7. TempoEnergy, Inc. #64 Poker Lake Unit Oil
 Unit C, 1650' FWL & 330' FNL, S17, T25S, R30E
 Completed 7-6-84 TD-3736' PBD-3732'
 Perf. 3688' - 3720' (Delaware)

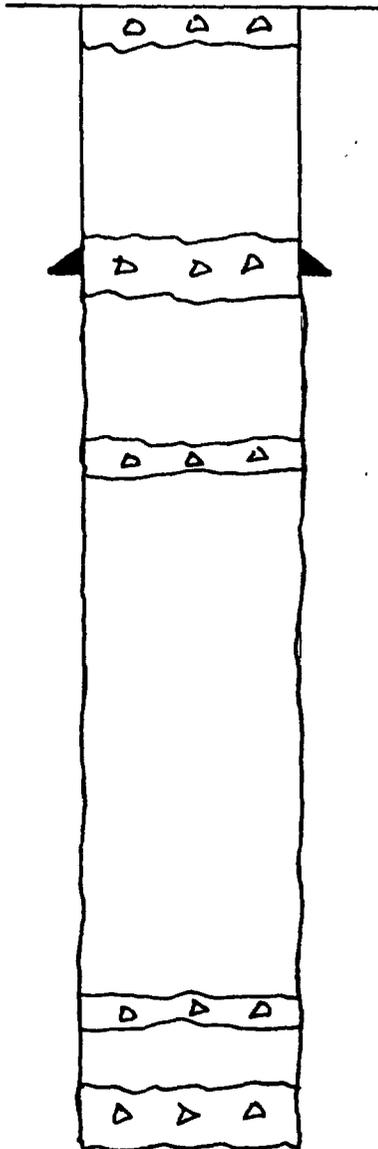
| Hole Size, in. | CSG Size, In. | CSG Depth, ft. | CMT Sx. |
|-------------------|------------------|-------------------|------------|
| 12 1/4 | 9 5/8 | 828 | 325 |
| 7 7/8 | 5 1/2 | 3736 | 200 |

8. J. Ray Stewart #61 Poker Lake Unit Oil
 Unit E, 1980' FNL & 660' FWL, S17, T25S, R30E
 Completed 1-5-84 TD-3765' PBD-3734'
 Perf. 3706' - 3710', CIBP at 3700', Perf. 3686' - 3694', (Delaware)
 OWWO: 12-84 Drlg. out to PBD-3717', frac lower perms and produce
 perms 3686' - 94' & 3706' - 10' (Delaware)

| Hole Size, in. | CSG Size, In. | CSG Depth, ft. | CMT Sx. |
|-------------------|------------------|-------------------|-------------|
| 12 1/4 | 8 5/8 | 520 | 120 (circ.) |
| 7 7/8 | 4 1/2 | 3764 | 200 |

OPERATOR - RALPH LOWE
LEASE - POKER LAKE STATE
WELL NO. - 3

DATE P & A-12/11/60
LOCATION: UNIT L, S8,
T25S, R30E



Spot 10 sx. at top with marker

8-5/8", 24#, J-55, ST&C, Casing at 658' with
400 sx. circ. to surface (12-1/4" hole)

Spot 15 sx. 610' - 665'

Spot 15 sx. 1570' - 1620'

7-7/8" hole

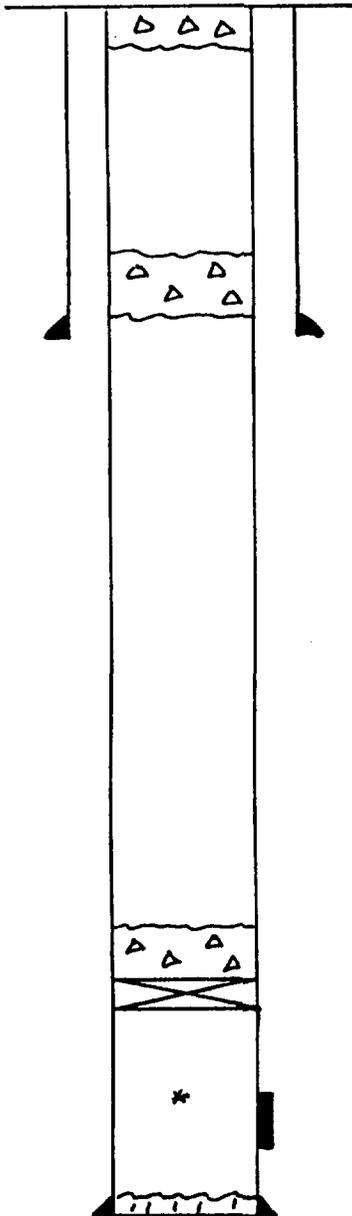
spot 15 sx. 3370' - 3420'

spot 45 sx. 3570' - 3701'

TD-3701'

OPERATOR - CALVIN F. TENNISON
LEASE - R&B FEDERAL
WELL NO. - 1

DATE P&A - 5/24/94
LOCATION: UNIT A, S18
T25S, R30E



Spot 10 sx. at top

Spot 50 sx. 300' - 600'
8-5/8", 24#, J-55, ST&C Csg. at 683' with
400 sx. circ. to surface (12-1/4" hole)

Salt gel

CIBP at 3260' with 25 sx. on top to 3073'

Perf. 3639.5' - 3645.5'

5-1/2", 14#, J-55, ST&C Csg. at 3666' with
780 sx. (7-7/8" hole)

TD-3666'
PBD-3664'

*400' tubing twisted off and left in hole 12/88 - unable to fish 2 years later.

Affidavit of Publication

No 18424

State of New Mexico,
County of Eddy, ss.

Amy McKay

being first duly sworn, on oath says:

That she is Business Manager of the Carlsbad Current-Argus, a newspaper published daily at the City of Carlsbad, in said county of Eddy, state of New Mexico and of general paid circulation in said county; that the same is a duly qualified newspaper under the laws of the state wherein legal notices and advertisements may be published; that the printed notice attached hereto was published in the regular and entire edition of said newspaper and not in supplement thereof on the date as follows, to wit:

| | |
|-----------------------------|--------------|
| <u>May 28</u> | <u>19 98</u> |
| <u>May 29</u> | <u>19 98</u> |
| <u>May 30</u> | <u>19 98</u> |
| <u>May 31</u> | <u>19 98</u> |
| <u> </u> | <u>19</u> |
| <u> </u> | <u>19</u> |

That the cost of publication is \$ 68.06, and that payment thereof has been made and will be assessed as court costs.

Amy McKay

Subscribed and sworn to before me this

15th day of June, 1998

Donna Crump

My commission expires 8/1/98
Notary Public

May 28, 29, 30, 31, 1998

NOTICE FOR APPLICATION FOR AUTHORIZATION TO INJECT

J. RAY STEWART, P.O. Box 451, Midland, TX 79702, phone (915) 687-1086, has applied to the New Mexico Oil Conservation Division for a permit to reinject produced water into the Poker Lake State Lease Well #1 located 664' FSL & 667' FWL, Sec. 8, T25S, R30E, Eddy Co. This well is in the Corral Canyon (Delaware) Field and the proposed injection interval is 3649' - 3679' in the Delaware zone. Expected maximum in-

jection rate is 500 BWPD at 650 psi well-head pressure. 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.

P 497 382 550

To your RETURN ADDRESS completed on the reverse side:

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

| | |
|--|-----------------------------------|
| Sent to MOBIL EXPLORATION & PRODUCING US INC | |
| Street & Number 550 W. ILLINOIS AV., STE. 100 | |
| Post Office, State, & ZIP Code MIDLAND, TEXAS 79701 | |
| Postage | \$.28 |
| Certified Fee | 1.35 |
| Special Delivery Fee | |
| Restricted Delivery Fee | |
| Return Receipt Showing to Whom & Date Delivered | |
| Return Receipt Showing to Whom, Date, and Address (if different) | |
| TOTAL Postage & Fees | 1.10 |
| Postmark or Date | MIDLAND, TEXAS MAY 10 1995 |

PS Form 3800, April 1995

3. Article Addressed to:
MOBIL EXPLORATION & PRODUCING U.S. INC
550 W. ILLINOIS AV., STE. 100
MIDLAND, TEXAS 79701

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
[Signature]

PS Form 3811, December 1994

4a. Article Number
P497382550

4b. Service Type
 Registered
 Express Mail
 Certified
 Insured
 COD

7. Date of Delivery
6-1-98

8. Addressee's Address (Only if requested and fee is paid)
500 W. ILLINOIS
#900

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- 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 will show to whom the article was delivered and the date delivered.

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

1. Addressee's Address
2. Restricted Delivery

Consult postmaster for fee.

Domestic Return Receipt

Thank you for using Return Receipt Service.

P 080 144 321



Receipt for Certified Mail
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

| | |
|--|-----------------------------------|
| Sent to BASS ENTERPRISES PRODUCTION CO. | |
| Street and No 6 DESTA DRIVE | |
| P.O., State and ZIP Code MIDLAND, TEXAS 79705 | |
| Postage | \$.28 |
| Certified Fee | 1.35 |
| Special Delivery Fee | |
| Restricted Delivery Fee | |
| Return Receipt Showing to Whom & Date Delivered | |
| Return Receipt Showing to Whom, Date, and Address (if different) | |
| TOTAL Postage & Fees | 1.10 |
| Postmark or Date | MIDLAND, TEXAS MAY 10 1995 |

PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- 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 will show to whom the article was delivered and the date delivered.

3. Article Addressed to:
BASS ENTERPRISES PRODUCTION CO.
6 DESTA DRIVE
MIDLAND, TEXAS 79705

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
[Signature]

PS Form 3811, December 1994

4a. Article Number
P080144321

4b. Service Type
 Registered
 Express Mail
 Certified
 Insured
 COD

7. Date of Delivery
6-1-98

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

102595-97-B-0179 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

P 497 382 551

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

| | |
|---|----------------|
| Sent to CALVIN F. TENNISON | |
| Street & Number 2401 MARTIN LANE | |
| Post Office, State, & ZIP Code CARLSBAD, NEW MEXICO 88220 | |
| Postage | \$ 1.78 |
| Certified Fee | 1.35 |
| Special Delivery Fee | |
| Restricted Delivery Fee | |
| Return Receipt Showing to Whom & Date Delivered | 1.10 |
| Return Receipt Showing to Whom, Date, Postage, & Fee | 3.23 |
| TOTAL Postage & Fees | 3.23 |
| Postage on Package | |

PS Form 3811, April 1991 0083

USPS VILLAGE STA

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- 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 will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

COMMISSION OF PUBLIC LANDS
NEW MEXICO STATE LAND OFFICE
P. O. BOX 1148
SANTE FE, NEW MEXICO 87504-1148

5. Received By: (Print Name)

6. Signature: (Addresssee or Agent)

7. Date of Delivery

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

4a. Article Number
P497382553

4b. Service Type
 Registered
 Express Mail
 Certified
 Insured
 COD

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

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

USPS - 87501-36

PS Form 3811, December 1994 102595-97-8-0179

USPS VILLAGE STA

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- 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 will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

CALVIN F. TENNISON
2401 MARTIN LANE
CARLSBAD, NEW MEXICO 88220

5. Received By: (Print Name)

6. Signature: (Addresssee or Agent)

7. Date of Delivery

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

4a. Article Number
P497382551

4b. Service Type
 Registered
 Express Mail
 Insured
 COD
 Certified

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

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

PS Form 3811, December 1994

USPS VILLAGE STA

Thank you for using Return Receipt Service.

P 497 382 553

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

| | |
|---|----------------|
| Sent to COMMISSION OF PUBLIC LANDS NEW MEXICO STATE LAND OFFICE | |
| Street & Number P. O. BOX 1148 | |
| Post Office, State, & ZIP Code SANTE FE, NEW MEXICO 87504-1148 | |
| Postage | \$ 1.78 |
| Certified Fee | 1.35 |
| Special Delivery Fee | |
| Restricted Delivery Fee | |
| Return Receipt Showing to Whom & Date Delivered | 1.10 |
| Return Receipt Showing to Whom, Date, Postage, & Fee | 3.23 |
| TOTAL Postage & Fees | 3.23 |

PS Form 3811, April 1991 0083

USPS VILLAGE STA

Thank you for using Return Receipt Service.

Domestic Return Receipt

Domestic Return Receipt

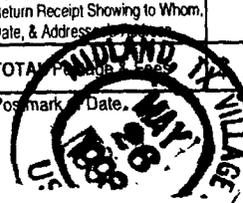
P 497 382 546

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

| | |
|---|----------------|
| Sent to ROBERT H. FORREST, JR. | |
| Street & Number 414 S. CANAL STREET | |
| Post Office, State, & ZIP Code CARLSBAD, NEW MEXICO 88220 | |
| Postage | \$ 1.78 |
| Certified Fee | 1.35 |
| Special Delivery Fee | |
| Restricted Delivery Fee | |
| Return Receipt Showing to Whom & Date Delivered | |
| Return Receipt Showing to Whom, Date, & Addressee's Address | |
| TOTAL Postage & Fees | 3.23 |
| Postmark Date | |

5661 April '008C



is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return the 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 will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

ROBERT H. FORREST, JR.
414 S. CANAL STREET
CARLSBAD, NEW MEXICO 88220

5. Received By: (Print Name)

Signature: (Addressee or Agent)
PS Form 3811, December 1994

Domestic Return Receipt

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

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

4a. Article Number

P 497382546

4b. Service Type

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

7. Date of Delivery

5/27/94

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

Thank you for using Return Receipt Service.

P 497 382 552

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

| | |
|---|----------------|
| Sent to MARY R. LOWE MARALO, INC. | |
| Street & Number 223 W. WALL ST. | |
| Post Office, State, & ZIP Code MIDLAND, TEXAS 79701 | |
| Postage | \$ 1.78 |
| Certified Fee | 1.35 |
| Special Delivery Fee | |
| Restricted Delivery Fee | |
| Return Receipt Showing to Whom & Date Delivered | |
| Return Receipt Showing to Whom, Date, & Addressee's Address | |
| TOTAL Postage & Fees | 3.23 |
| Postmark Date | |

5661 April '008C



is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return the 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 will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

(MARY R. LOWE)
MARALO, INC.
223 W. WALL ST.
MIDLAND, TEXAS 79701

5. Received By: (Print Name)

Signature: (Addressee or Agent)
PS Form 3811, December 1994

Domestic Return Receipt

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

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

4a. Article Number

P497382552

4b. Service Type

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

7. Date of Delivery

5/27/94

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

Thank you for using Return Receipt Service.

P 497 382 549

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

| | |
|---|-----------------------|
| Sent to TEMPO ENERGY, INC. | |
| Street & Number P. O. BOX 1034 | |
| Post Office, State, & ZIP Code MIDLAND, TEXAS 79702-1034 | |
| Postage | \$.78 |
| Certified Fee | 1.35 |
| Special Delivery Fee | |
| Restricted Delivery Fee | |
| Return Receipt Showing to Whom & Date Delivered | |
| Return Receipt Showing to Whom, Date, & Address | 1.10 |
| TOTAL Postage & Fees | 2.13 |
| Postmark of Date | MIDLAND TX 12 26 1998 |

PS Form 3800, April 1995



Is your RETURN ADDRESS completed on the reverse side?

| | | | |
|---|--|--|--|
| SENDER: ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ 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 will show to whom the article was delivered and the date delivered. | | I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee. | |
| 3. Article Addressed to: TEMPO ENERGY, INC. P. O. BOX 1034 MIDLAND, TEXAS 79702-1034 | | 4a. Article Number P497382549 | |
| 5. Received By: (Print Name) [Signature] | | 4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Express Mail TX DOWN <input type="checkbox"/> Return Receipt Requested <input type="checkbox"/> Insured <input type="checkbox"/> COD <input checked="" type="checkbox"/> Certified | |
| 6. Signature: (Addressee's Agent) X [Signature] | | 7. Date of Delivery 27 | |
| PS Form 3811, December 1994 | | 8. Addressee's Address (or if requested and fee is paid) [Signature] | |

Domestic Return Receipt

Thank you for using Return Receipt Service.

CHECKLIST for ADMINISTRATIVE INJECTION APPLICATIONS

Operator: J. RAY STEWART Well: POKER LAKE ST. No. 1
Contact: _____ Title: PRAS / OWNER Phone: 915-687-1086
DATE IN 6-10-98 RELEASE DATE 6-25-98 DATE OUT 7-31-98

Proposed Injection Application is for: WATERFLOOD Expansion Initial
Original Order: R- _____ Secondary Recovery Pressure Maintenance
 SENSITIVE AREAS SALT WATER DISPOSAL Commercial Well

WIPP Capitan Reef

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

AREA of REVIEW WELLS

8 Total # of AOR 2 # of Plugged Wells
YES Tabulation Complete YES Schematics of P & A's
YES Cement Tops Adequate NO AOR Repair Required

INJECTION FORMATION

Injection Formation(s) DELAWARE Compatible Analysis

Source of Water or Injectate ARIA PRODUCTION

PROOF of NOTICE

Copy of Legal Notice Information Printed Correctly
 Correct Operators Copies of Certified Mail Receipts
 Objection Received Set to Hearing _____ Date

NOTES: * OBJECTION FROM LEASEHOLDER - SATISFIED 7-30-98

APPLICATION QUALIFIES FOR ADMINISTRATIVE APPROVAL? YES

COMMUNICATION WITH CONTACT PERSON:

1st Contact: Telephoned Letter 7-30 Date Nature of Discussion (JIMMY PICHARDSON) - ORB. SAT.
2nd Contact: Telephoned Letter 7-31 Date Nature of Discussion VERBAL TO J. RAY STEWART
3rd Contact: Telephoned Letter _____ Date Nature of Discussion _____