



OIL CONSERVATION DIVISION  
RECEIVED

Penaco Exploration and Production Inc  
Midland Producing Division

500 N. Lorraine  
Midland TX 79701

95 APR 16 PM 8:52  
Midland TX 79702

March 22, 1995

*Suspense Date*

*4/24/95*

GOV - STATE AND LOCAL GOVERNMENTS  
NON-STANDARD GAS PRORATION UNIT  
Eumont "16'" State Well No. 1  
Eumont Yates 7 Rivers Queen (Pro Gas) Field  
Lea County, New Mexico

State of New Mexico  
Energy and Minerals Department  
Oil Conservation Division  
2040 South Pacheco  
Santa Fe, New Mexico 87505

Attention: Mr. Michael E. Stogner

Gentlemen:

An Exception, by administrative approval, to Rule 104, D. II. is requested for the captioned well. This well is located 1930' FNL & 760' FWL, Unit Letter "E", of Section 16, T-19-S, R-37-E.

This well must be drilled in this location to ensure proper development of the field. Wells drilled previously on Non-Standard Gas Proration Units in this field have proven to be viable wells. It will be completed in the Penrose formation.

The offset operators of this lease have been notified of this request. Attached is Form C-102 and the offset operator's list with proof of notification. Any questions concerning this request should be directed to me at (915) 688-4606.

Yours very truly,

*C. Wade Howard*

C. W. Howard  
Engineer's Assistant

CWH:cwh

Attachment

cc: NMOCD, P. O. Box 1980, Hobbs, NM 88240

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

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

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

DISTRICT IV  
P. O. Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-102  
Revised February 10, 1994

Instructions on back

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

Submit to Appropriate District Office

State Lease-4 copies  
Fee Lease-3 copies

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

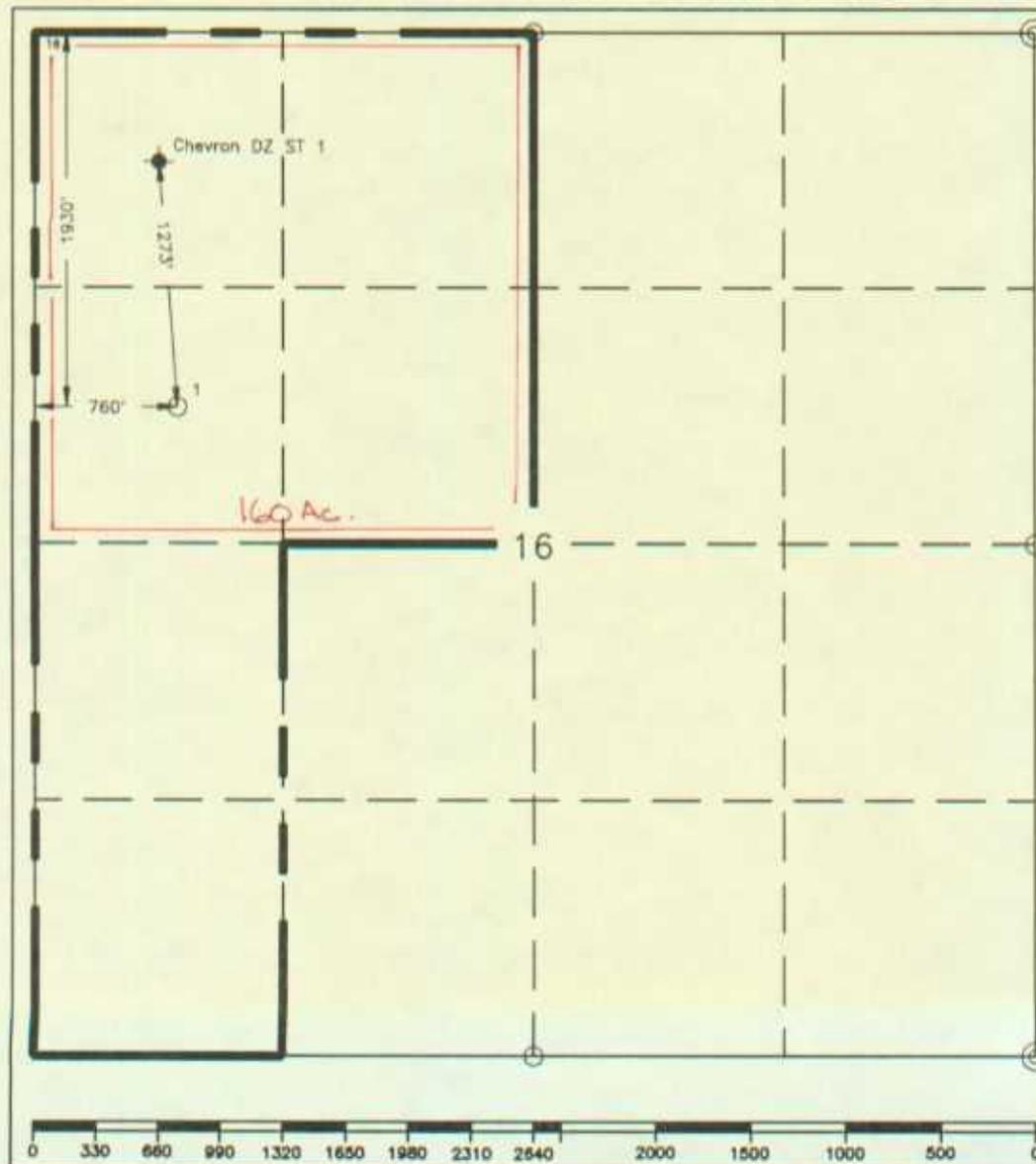
<sup>1</sup> API Number		<sup>2</sup> Pool Code		<sup>3</sup> Pool Name Eumont Pro Gas Yates, Seven Rivers, Queens	
<sup>4</sup> Property Code		<sup>5</sup> Property Name Eumont "16" State			<sup>6</sup> Well Number 1
<sup>7</sup> OGRID No. 22351		<sup>8</sup> Operator Name TEXACO EXPLORATION & PRODUCTION, INC.			<sup>9</sup> Elevation 3660'

<sup>10</sup> Surface Location									
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	16	19-S	37-E		1930'	North	760'	West	Lea

<sup>11</sup> Bottom Hole Location if Different From Surface									
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

<sup>12</sup> Dedicated Acres 160	<sup>13</sup> Joint or Infill	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION.



<sup>16</sup> OPERATOR CERTIFICATION	
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.	
Signature	<i>C. Wade Howard</i>
Printed Name	C. Wade Howard
Position	Engineer's Assistant
Company	Texaco Expl. & Prod. Inc.
Date	March 21, 1995
<sup>17</sup> 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 supervision, and that the same is true and correct to the best of my knowledge and belief.	
Date Surveyed	March 10, 1995
Signature & Seal of Professional Surveyor	<i>John S. Piper</i>
Certificate No.	7254 John S. Piper
Sheet	



Texaco Exploration and Production Inc  
Midland Producing Division

500 N. Loraine  
Midland TX 79701

P. O. Box 3105  
Midland TX 79701

March 22, 1995

GOV - STATE AND LOCAL GOVERNMENTS  
NON-STANDARD GAS PRORATION UNIT  
Eumont "16" State Well No. 1  
Sec. 16, T-19-S, R-37-E  
Eumont Yates 7 Rivers Queen (Pro Gas) Field  
Lea County, New Mexico

TO THE OFFSET OPERATORS

Gentlemen:

As an offset operator to the captioned lease, you are being furnished with a copy of our Application for an Exception to Rule 104, D. II. If you have no objection, please sign the waiver at the bottom of this letter and return in the enclosed envelope.

Any questions concerning this request should be directed to me at (915) 688-4606.

Yours very truly,

*C. Wade Howard*

C. W. Howard  
Engineer's Assistant

CWH:cwh

File

**WAIVER APPROVED:**

**COMPANY:** \_\_\_\_\_

**BY:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

EUMONT "16" STATE WELL NO. 1

OFFSET OPERATORS

Meridian Oil, Inc.  
21 Desta Dr.  
Midland, Texas 79705

Chevron U.S.A. Inc.  
P. O. Box 1150  
Midland, Texas 79702

Exxon Company USA  
P. O. Box 1600  
Midland, Texas 79702

Wayne A. Bissett  
P. O. Box 2101  
Midland, Texas 79702

Timothy D. Collier  
P. O. Box 50066  
Midland, Texas 79710

Donald G. Becker, Jr.  
P. O. Box 481  
Artesia, New Mexico 88211

Charles M. Morgan  
210 South 8th St.  
Artesia, New Mexico 88210

Conoco Inc.  
10 Desta Dr. Ste. 100W  
Midland, Texas 79705

Mewbourne Oil Company  
500 W. Texas, Ste. 1020  
Midland, Texas 79701

**Is your RETURN ADDRESS completed on the reverse side?**

**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 will show to whom the article was delivered and the date delivered.

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

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

MEADIAN OIL, Inc.  
21 DESTA DR.  
MIDLAND, TX 79705

4a. Article Number  
P 188 919 582

4b. Service Type

Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
3-23

5. Signature (Addressee)

6. Signature (Agent)

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

PS Form 3811, December 1991 \*U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

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

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

CHEVRON U.S.A. INC.  
P.O. BOX 1150  
MIDLAND, TX 79702

4a. Article Number  
P 188 919 583

4b. Service Type

Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
MAR 23 1995

5. Signature (Addressee)

6. Signature (Agent)

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

PS Form 3811, December 1991 \*U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

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- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

EXXON COMPANY USA  
P.O. BOX 1600  
MIDLAND, TX 79702

4a. Article Number  
P 188 919 584

4b. Service Type

Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
MAR 20 1995

5. Signature (Addressee)

6. Signature (Agent)

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

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- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:  
 WAYNE A. BISSETT  
 P.O. BOX 2101  
 MIDLAND, TX 79709

4a. Article Number  
 P 188 919 585

4b. Service Type  
 Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

6. Signature (Agent)  
*Bonnie M. Star*

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

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

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:  
 TIMOTHY D. COLLIER  
 P.O. BOX 50066  
 MIDLAND, TX 79710

4a. Article Number  
 P 188 919 642

4b. Service Type  
 Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
 MAR 23 1991

5. Signature (Addressee)

6. Signature (Agent)  
*Bonnie M. Star*

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

PS Form 3811, December 1991 \*U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

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

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:  
 DONALD G. BECKER, JR.  
 P.O. BOX 481  
 ARTESIA, NM 88211

4a. Article Number  
 P 188 919 641

4b. Service Type  
 Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
 03-23-95

5. Signature (Addressee)  
*Chonda Becker*

6. Signature (Agent)

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

PS Form 3811, December 1991 \*U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Is your RETURN ADDRESS completed on the reverse side?

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Thank you for using Return Receipt Service.

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- Print your name and address on the reverse of this form so that we can return this card to you.
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3. Article Addressed to:

CHARLES M. MORGAN  
210 SOUTH 8<sup>TH</sup> ST.  
ARTESIA, NM 88210

4a. Article Number  
P 188 919 640

4b. Service Type  
 Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
3-27-95

5. Signature (Addressee)  
*Charles Morgan*

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

6. Signature (Agent)

PS Form 3811, December 1991 \*U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

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3. Article Addressed to:

CONOCO INC.  
10 DESTA DR. STE. 100W  
MIDLAND, TX 79705

4a. Article Number  
P 188 919 639

4b. Service Type  
 Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
3-23-95

5. Signature (Addressee)  
*Anita Gonzalez*

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

6. Signature (Agent)

PS Form 3811, December 1991 \*U.S. GPO: 1992-323-402 **DOMESTIC RETURN RECEIPT**

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- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

MEWBOURNE Oil COMPANY  
500 W. TEXAS, STE. 1020  
MIDLAND, TX 79701

4a. Article Number  
P 237 053 903

4b. Service Type  
 Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
3-23-95

5. Signature (Addressee)  
*[Signature]*

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

6. Signature (Agent)

PS Form 3811, December 1991 \*U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

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