

MERIDIAN OIL

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OIL CONSERVATION DIVISION
RECEIVED

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August 10, 1995

**Mr. Micheal Stogner
Oil Conservation Division
2040 South Pacheco Street
Santa Fe, New Mexico 87505**

**RE: Request for Administrative Approval
Non Standard Proration Unit(s)
S.R. Cooper Well No. 3
S. R. Cooper -A- Well No. 1
Sec. 23, T24S, R36E
Jalmat Gas Pool
Lea County, New Mexico**

Mr. Stogner:

Meridian Oil Inc. respectfully requests administrative approval for two (2) non-standard proration units. One consisting of 120 acres ('L' shape) and the other consisting of 80 acres (Stand-up). This request is made due to the shape of the lease(s), and to the existing non standard proration units already assigned in this oil/gas pool. Please find attached my certification of verification that all offset operators were notified. Return receipts will be furnished upon receipt.

Should you have any questions, or need additional information, please do not hesitate to contact me at 915-688-6943.

Sincerely,



**Donna J. Williams
Regulatory Compliance**

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, NM 87504-2088

Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025-25444		² Pool Code Jalmat	³ Pool Name
⁴ Property Code	⁵ Property Name S.R. Cooper -A-		⁶ Well Number 1
⁷ OGRID No. 26485	⁸ Operator Name Meridian Oil Inc.		⁹ Elevation

¹⁰ Surface Location

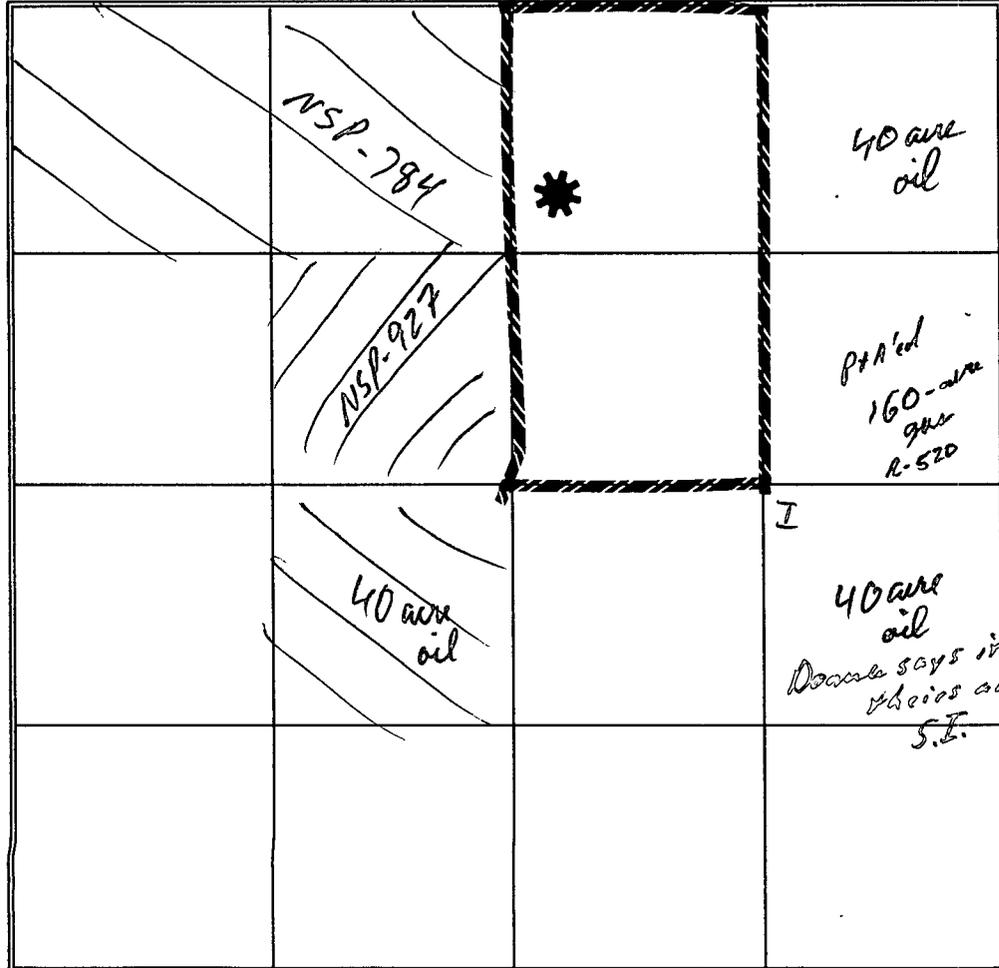
UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
B	23	24S	36E		990'	North	2160'	East	Lea

¹¹ 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

¹² Dedicated Acres 80 NSPU	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No. Have applied for Non-standard proration unit
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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



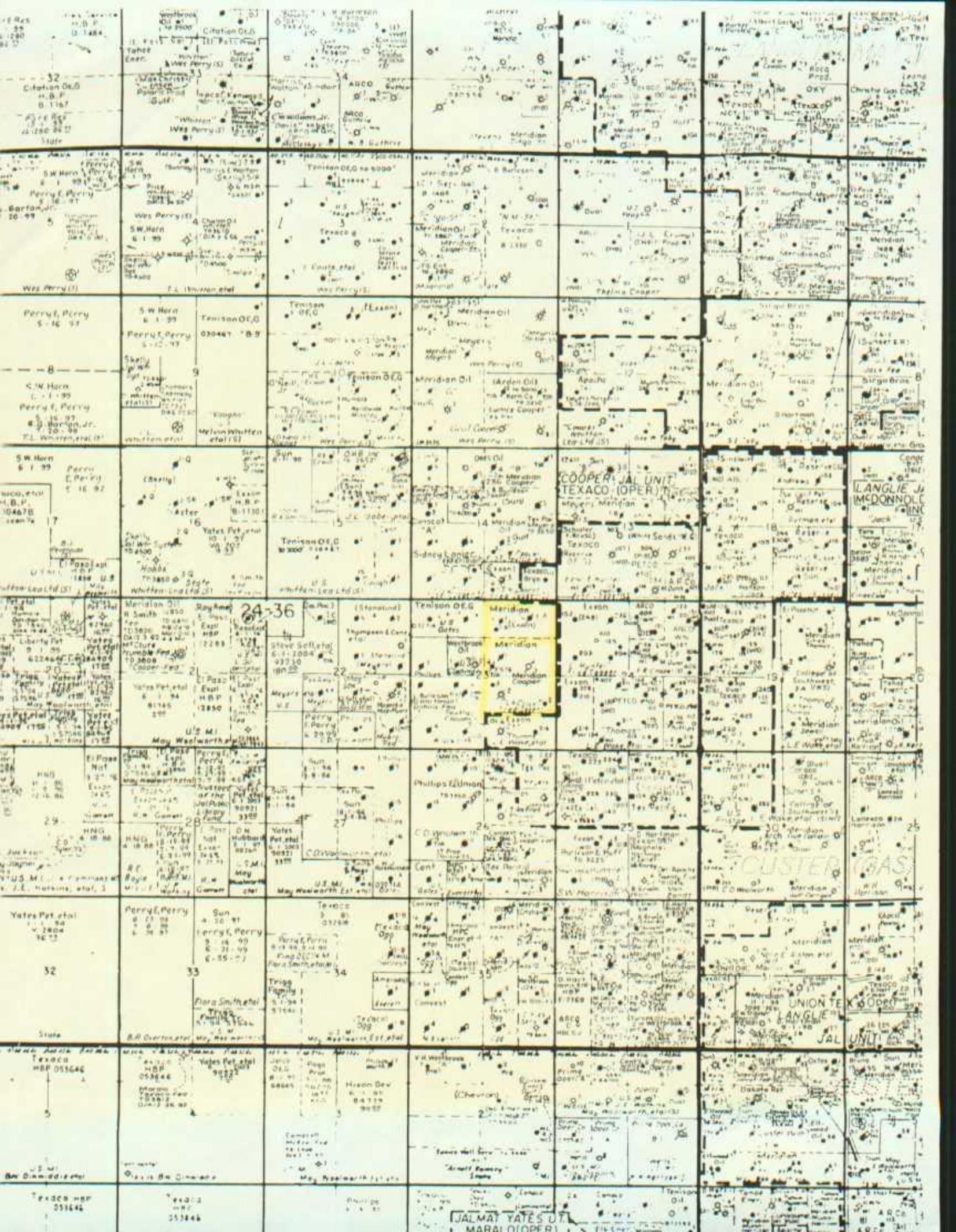
¹⁷ OPERATOR CERTIFICATION
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

[Signature]
Signature
Donna Williams
Printed Name
Regulatory Compliance
Title
7/5/95
Date

¹⁸ 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 belief.

Date of Survey
Signature and Seal of Professional Surveyer:

Certificate Number



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Citation O&G
H.B.P.
B-1167
Perry, Perry
S-10-97
W.S. Whitten et al

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W.S. Whitten et al
Perry, Perry
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W.S. Whitten et al

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Tension O&G
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W.S. Whitten et al

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W.S. Whitten et al

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Meridian Oil
S-10-97
W.S. Whitten et al

I, DONNA WILLIAMS, DO HEREBY CERTIFY THAT ON AUGUST 10, 1995, THE BELOW LISTED OPERATORS WERE NOTIFIED OF OUR REQUEST FOR ADMINISTRATIVE APPROVAL FOR TWO (2) NON-STANDARD PRORATION UNITS IN THE JALMAT GAS POOL, LOCATED IN SEC. 23, T24S, R36E, LEA COUNTY, NEW MEXICO.

OFFSET OPERATORS

**Exxon Company U.S.A.
Box 1600
Midland, Texas 79702**

**Texaco Exploration & Production Inc.
Box 3109
Midland, Texas 79702**

**Phillips Petroleum Company
4001 Penbrook
Odessa, Texas 79762**

**Tenison Oil Company
8140 Walnut Lane, Ste 601
Dallas, Texas 75231**

**Westbrook Oil Company
Box 2264
Hobbs, New Mexico 88240**



Donna Williams

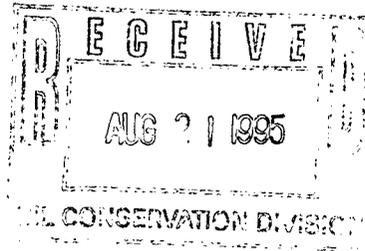
Aug. 10, 1995

Date

MERIDIAN OIL

August 17, 1995

Mr. Michael Stogner
Oil Conservation Division
2040 South Pacheco Street
Santa Fe, New Mexico 87505



RE: **Certified Return Receipts
Request for Administrative Approval
S.R. Cooper Well No. 3
S. R. Cooper -A- Well No. 1
Sec. 23, T24S, R36E
Jalmat Gas Pool
Lea County, New Mexico**

Mr. Stogner:

Please find enclosed the certified/return receipts concerning the Offset Operator notification for the above referenced request that was submitted on August 10, 1995.

Should you have any questions, or need additional information, please do not hesitate to contact me at 915-688-6943.

Sincerely,

Donna J. Williams
Regulatory Compliance

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):

- 1. Addressee's Address
- 2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Tenison Oil Company
8140 Walnut Lane, Ste 601
Dallas, Tx 75231

4a. Article Number
Z 740 400 192

4b. Service Type

Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
8/14

5. Signature (Addressee)
[Signature]

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

6. Signature (Agent)
[Signature]

Thank you for using Return Receipt Service.

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.
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- 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.

3. Article Addressed to:

Phillips Petroleum Company
4001 Penbrook
Odessa, Texas 79762

4a. Article Number
Z 740 400 190

4b. Service Type

Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
8-11-95 *[Signature]*

5. Signature (Addressee)

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

6. Signature (Agent)
[Signature: Nancy Buck]

Thank you for using Return Receipt Service.

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.
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- 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.

3. Article Addressed to:

Exxon Company U.S.A.
Box 1600
Midland, Texas 79702

4a. Article Number
Z 740 400 194

4b. Service Type

Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
AUG 11 1995

5. Signature (Addressee)

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**

Thank you for using Return Receipt Service.

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.
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- 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.

3. Article Addressed to:

Texaco Exploration & Production
Box 3109
Midland, Tx 79702

4a. Article Number
Z 740 400 193

4b. Service Type

Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
AUG 11 1995

5. Signature (Addressee)

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**

Thank you for using Return Receipt Service.

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):

1. Addressee's Address
2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Westbrook Oil Company
Box 2264
Hobbs, New Mexico 88240

4a. Article Number
Z 740 400 191

4b. Service Type

Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
8-11-95

5. Signature (Addressee)

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**

Thank you for using Return Receipt Service.