| Submit within 45 days of well co | State of New Mexico Energy, Minerals and Natural Resources | | | | | Revised November 6, 2013 1. WELL API NO. 30-015-42934 | | | | | | | | | | | |
|--|--|---|---|--------------------------------------|-----------------|--|---------------------------|---|---------------------------------------|--|--|--|--|--|---|--|--|
| | | | | | | | | | | | | | | | | | |
| | | Oil Conservation Division | | | | | 2. Well Name: | | | | | | | | | | |
| 1220 S. St Francis Dr. Santa Fe, NM 87505 | | | | | | SKEEN 21 B2CN STATE #001H 3. Well Number: 001H | | | | | | | | | | | |
| | | | | | | | | | HYDRAULIC FRACTURING FLUID DISCLOSURE | | | | | | 4. Surface Hole Location: Unit: C Lot: C Section: 21 Township: 26S Range: 28E Feet from: 2310 Feet from: 2310 F/W Line: W | | |
| | | | | | | | | | ⊠ Original □ Amendment | | | | | | 5. Bottom Hole Location: Unit:N Lot: Section:21 Township:26S Range:28E Feet from:335 N/S Line:S | | |
| | | | | | | Feet from: 1895 6. latitude: | E/ | W Line:W longitude: | | | | | | | | | |
| | | | | | | 32.0 | 34503076 | -104.0935431 | | | | | | | | | |
| | | | | | | 7. County: Eddy | 1 | | | | | | | | | | |
| Operator Name and Address: | | | | | 9. OGRID: | 14744 | 10. Phone Numbe | er: 575-393-5905 | | | | | | | | | |
| MEWBOURNE OIL PO Box 5270 Hobbs 88241 | СО | | | | s. COND. | 14144 | To. I florie Nambe | 373 333 3303 | | | | | | | | | |
| 11. Last Fracture Date: 12/5/2015 Frac Performed by: Halliburton 12. Product | | | | | | | | | | | | | | | | | |
| | | | | | | actured Interval: | | | | | | | | | | | |
| | | | | | | ,959 ft to 7,993 ft ume of Fluid Pumped: | | | | | | | | | | | |
| 7,976 ft | | | | | | 5,790,078 gals | | | | | | | | | | | |
| 17. Total Volume of Re-Use Water Pumped: N/A 18. Perce | | | | | | of Re-Use Water in Fluid Pumped: Not Disclosed | | | | | | | | | | | |
| 19. HYDRAULIC FLUID | COMPOSITION | AND CONCENTRAT | ION: | | 3.0 | | 28/24/2.534 | 20 SIA NATION 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 | | | | | | | | | |
| Trade Name | Supplier | Purpose | Ingredients | (CAS #) Chemi Service # | cal Abstract | Maximum Ingred Concentration in mass) | dient n Additive (% by | Maximum Ingredient Concentration in HF Fluid (% by mass) | | | | | | | | | |
| Fresh Water | Operator | Base Fluid | Fresh Water | 7732-18-5 NA | | | 100% | 88.06082% | | | | | | | | | |
| BE-9, DCA-32003, FR-86, LCA-1, OptiKleen-WF(TM), | Halliburton | Biocide, Concentrate, Friction | NA Acrylamide | 79-06-1 | | | 0% 0.1% | 0% | | | | | | | | | |
| S | | Reducer, Proppant, Solvent, Wetting Agent | Alkylbenzene sulfonate compds. with 2-propanamine | 68584-25-8 | | | 10% | 0.00042% | | | | | | | | | |
| | | | Alkylbenzene sulfonate compds. with triethanolamine | 68584-24-7 | | | 10% | 0.00042% | | | | | | | | | |
| | | | Amine salt | Confidential 68648-87-3 | | | 0.1% | 0% | | | | | | | | | |
| | | | Benzene, C10-16 alkyl derivatives | 00040-07-3 | | | 1% | 4E-05% | | | | | | | | | |
| | | | Copolymer of acrylamide and sodium acrylate | Confidential | | | 30% | 0.01241% | | | | | | | | | |
| | | | Copper sulfate | 7758-98-7 | | | 0.1% | 0% | | | | | | | | | |
| | | | Crystalline silica, quartz | 14808-60-7 | | | 100% | 11.83739% | | | | | | | | | |
| | | | Ethoxylated alcohol | Proprietary | | | 5% | 0.00207% | | | | | | | | | |
| | | | Fatty acid ester Glycerine | Confidential 56-81-5 | | | 5% 30% | 0.00414% 0.01241% | | | | | | | | | |
| | | | Hydrotreated light | Proprietary | Proprietary | | 30% | 0.01241% | | | | | | | | | |
| | | | petroleum distillate | | | | 1000 | | | | | | | | | | |
| | | | Methanol Paraffinic solvent | 67-56-1 Confidential 7647-14-5 | | | 100% 100% | 0.04189% 0.00068% | | | | | | | | | |
| | | | Sodium chloride | | | | 10% | 0.00414% | | | | | | | | | |
| | | | Sodium perborate tetrahydrate | 10486-00-7 | eng sometiment. | | 100% | 0.00497% | | | | | | | | | |
| | | | Tributyl tetradecyl phosphonium chloride | 81741-28-8 | | | 10% | 0.00227% | | | | | | | | | |
| | | | Water | 7732-18-5 | | | 100% | 0.04772% | | | | | | | | | |
| 20. I, as Operator, hereby certify the Signature: Signed Ele | executive and the second second | n on this disclosure form is true Printed Name: NM Young | e and complete to the best | of my knowledge s | and belief. | Title: Manager | | | | | | | | | | | |
| Date: 1/6/2016 | | -mileo Name. NITI TOUTIG | | | | Title: Manager | - | | | | | | | | | | |
| E-mail Address: rterrell@m | ewbourne.com | | | | | | | | | | | | | | | | |