TYPE NSL

PARG 1333949 116

ABOVE THIS LINE FOR DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION

- Engineering Bureau -1220 South St. Francis Drive, Santa Fe, NM 87505



		ADMINISTRATIVE APP	LICATION CHECKLIS	T
T	HIS CHECKLIST IS M	ANDATORY FOR ALL ADMINISTRATIVE APPLIC	CATIONS FOR EXCEPTIONS TO DIVISION RUI	LES AND REGULATIONS
Applic	[DHC-Down	s: ndard Location] [NSP-Non-Standard nhole Commingling] [CTB-Lease C ool Commingling] [OLS - Off-Lease [WFX-Waterflood Expansion] [PM	Proration Unit] [SD-Simultaneous Commingling] [PLC-Pool/Lease Co Storage] [OLM-Off-Lease Measu X-Pressure Maintenance Expansion Pl-Injection Pressure Increase]	ommingling] irement] n]
[1]	TYPE OF AP [A]	PLICATION - Check Those Which Location - Spacing Unit - Simultane NSL NSP SD	Apply for [A] eous Dedication Ruby Federal #12	ConocoPhillips 30-025-4100 NS -
	Check [B]	One Only for [B] or [C] Commingling - Storage - Measurem DHC CTB PLC		ws -
	[C]	Injection - Disposal - Pressure Incre		
	[D]	Other: Specify		
[2]	NOTIFICAT: [A]	ION REQUIRED TO: - Check Thos Working, Royalty or Overridin		ly
	[B]	Offset Operators, Leaseholders	or Surface Owner	
	[C]	Application is One Which Req	uires Published Legal Notice	
	[D]	Notification and/or Concurrent U.S. Bureau of Land Management - Commissio	Approval by BLM or SLO	
	[E]	For all of the above, Proof of N	Notification or Publication is Attached	d, and/or,
	[F]	☐ Waivers are Attached		
[3]		CURATE AND COMPLETE INFO	PRMATION REQUIRED TO PRO	OCESS THE TYPE
	al is accurate a	FION: I hereby certify that the inform nd complete to the best of my knowle quired information and notifications a	dge. I also understand that no action	
	Note:	Statement must be completed by an individ		pacity.
	Maunder r Type Name	Signature Signature	Senior Regulatory Specialist Title	12-5-13 Date
			Green DAG and Loo	1 ****

Susan.B.Maunder@conocophillips.com

e-mail Address

Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR

OCH GRAP OCD

FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010

	PARTMENT OF THE IN JREAU OF LAND MANA			L	Expires:	July 31, 2010
SUNDRY	JREAU OF LAND MANA NOTICES AND REPOI s form for proposals to	RTS ON WEI	MAY 30	2013	 Lease Serial No. NMLC029405B 	
Do not use thi	s form for proposals to	drill or to re-	nter an	<u> </u>	5. If Indian, Allottee of	
abandoned wei	I. Use form 3160-3 (API) tor such pr	oposais. RECEI		,	
SUBMIT IN TRI	PLICATE - Other instruc	tions on reve	rse side.		7. If Unit or CA/Agree	ement, Name and/or No.
 Type of Well Gas Well ☐ Oth 	er /				B. Well Name and No. RUBY FEDERAL	
Name of Operator CONOCOPHILLIPS COMPAN	Contact: IY E-Mail: rogerrs@co	RHONDA ROO onocophillips.com			9. API Well No. 30-025-41008-0)0-X1
3a. Address 3300 N "A" ST BLDG 6 MIDLAND, TX 79705		3b. Phone No. (Ph: 432-688 Fx: 432-688-	(include area code) -9171 6019		10. Field and Pool, or MALJAMAR	Exploratory 1880 W -
4. Location of Well (Footage, Sec., T.	, R., M., or Survey Description)				11. County or Parish,	and State
Sec 18 T17S R32E NESW 13	30FSL 1705FWL	,			LEA COUNTY,	NM /
12. CHECK APPR	ROPRIATE BOX(ES) TO	INDICATE	NATURE OF 1	NOTICE, REF	ORT, OR OTHE	R DATA
TYPE OF SUBMISSION			TYPE OF	FACTION		
□ Notice of Intent	☐ Acidize	☐ Deepe	en	☐ Production	n (Start/Resume)	☐ Water Shut-Off
_	☐ Alter Casing	☐ Fracti	ire Treat	☐ Reclamati	on	□ Well Integrity
☑ Subsequent Report	Casing Repair	□ New	Construction	□ Recomple	te	Other
☑ Subsequent Report ☐ Casing Repair ☐ Change Plans ☐		🗖 Plug a	and Abandon	☐ Temporar	ily Abandon	Drilling Operations
	☐ Convert to Injection	🗖 Plug l	3ack	■ Water Dis	posal	
Attach the Bond under which the wor following completion of the involved testing has been completed. Final Abdetermined that the site is ready for fit 5/15/13 MIRU Spud w/12 1/4" set @ 705'. Pump 300 sx (91 bumped plug. Circ 40 bbls cm	operations. If the operation resandonment Notices shall be file nal inspection.) bit & drill to 718' (spud TI bbls) class C lead cmt & it to surf. WOC. NUBOP	sults in a multiple ed only after all re D). RIH w/17 j 200 sx (48 bb). PT surf csg i	completion or reco quirements, includ ts, 8 5/8", 24#, s) class C tail o to 1500# 30 mil	ompletion in a nering reclamation, J-55 csg &	w interval, a Form 316 have been completed,	60-4 shall be filed once
	For CONOCO nmitted to AFMSS for proce	PHILLIPS COM essing by KUR	PÅNY, sent to t TSIMMONS on (the Hobbs 05/22/2013 (13	(MS2186SE)	
Name (Printed/Typed) RHONDA	ROGERS		Title STAFF	AEGULATUR	Y TECHNICIAN	
Signature (Electronic S			Date 05/17/2			
	THIS SPACE FO	R FEDERAL	OR STATE	OFFICE USI	E	
_Approved By ACCEPT	ED	[JAMES A TitleSUPERVIS		1/	Date 05/26/2013
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to condu	itable title to those rights in the		Office Hobbs		K	
Title 18 U.S.C. Section 1001 and Title 43	U.S.C. Section 1212, make it a	crime for any pers	on knowingly and	willfully to make	to any department or	agency of the United

States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.



Susan B. Maunder Sr. Regulatory Specialist Phone: (281) 206-5281 ConocoPhillips Company 600 N. Dairy Ashford Rd, Office P10-4-4054 Houston, TX 77079-1175

December 5, 2013

State of New Mexico
Oil Conservation Division
1220 South Saint Francis Drive
Santa Fe, New Mexico 87505

SUBJECT: REQUEST FOR NON-STANDARD LOCATION FOR RUBY FEDERAL #12 – API 30-025-41008

Dear Sirs,

ConocoPhillips Company respectfully requests a non-standard location exception to produce the Ruby Federal #12 well. The lease is recorded as NM LC029405B The well located in UL K, 1330' from the south line and 1705' from the west line of Section 18, Township 17S, Range 32E, Lea County, New Mexico. The bottom hole location is in UL N, 867' from the south lease line and 1614' from the west line of Section 18, Township 17S, Range 32E, The footages place the well closer than 330' from a Qtr/Qtr Section line. The table below details the ownership of adjacent spacing units in Section 18. ConocoPhillips is 100% lessee and 100% working interest owner of the Ruby federal lease.

Spacing Unit	Adjacent Units	# of Wells	Operator(s)
UL K	K UL F, G, J, N, O;		ConocoPhillips Company
	Sec. 18, 17S, 32E		
UL K	UL E, L, M	3	Cimarex Energy Co. of Colorado
UL N	UL J, K, L, O; Sec.	8	ConocoPhillips Company
	18, 17S, 32E		
UL N	UL M	1	Cimarex Energy Co. of Colorado

Enclosed are the following documents in support of this request.

- Administrative Application Checklist
- Copy of the New Mexico Form C-102

B. Maunder

A copy of this submittal is being sent to Bureau of Land Management, Carlsbad Field Office and Cimarex Energy Co. of Colorado via certified return receipt.

The granting of this exception will prevent waste and minimize surface disturbance. This well is currently shut-in pending approval of this request.

If you have questions regarding this request, I can be reached at 281-206-5281 or via email at <u>Susan.B.Maunder@conocophillips.com</u>.

Sincerely.

Susan B. Maunder

Senior Regulatory Specialist ConocoPhillips Company

District 1
1625 N. French Dr., Hohbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210

28813. First St., Artesia, NM 88210 Phona: (375) 748-1283 Fax: (375) 748-9720 District III 1000 Rio Bruzos Road, Aztec, NM 87410 Phone: (505) 334-6178 Fox: (505) 334-6170

District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 Phone: (505) 476-3460 Fax: (505) 476-3462

12 Dedicated Acres

¹³ Joint or Infill

Consolidation Code

State of New Mexico Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505

Form C-102 Revised August 1, 2011 Submit one copy to appropriate District Office

☐ AMENDED REPORT

		<i>W</i>	ÆLL LC	OCATIO:	N AND ACI	REAGE DEDIC	CATION PLA	T			
	API Numbe	r		² Pool Code			3 Pool Na	me			
30-025-410	800		4450	00	M	ALJAMAR; YES	O, WEST				
¹ Property	Code				⁵ Property	Name			6	Well Numbe	er
38653 RUBY FEDERAL								İ	12		
OGRID.	No.			^a Operator Name						⁹ Elevation	
217817		ConocoF	hillips Co	mpany				i	3952'		
					Surface	Location					
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/V	Vest line		County
K	18	178	32E		1330	SOUTH	1705	WEST		LEA	
			" Bot	ttom Hol	e Location I	Different Fron	n Surface				
UL or lot no.	Section	Township	Range	Lot ldn	Feet from the	North/South line	Feet from the	East/V	Vest line		County
N	18	178	22E	J	967	SOUTH	1614	WEST	i	LEY	

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.

15 Order No.

		- 1000		
16			T P	"OPERATOR CERTIFICATION
1 .			ľ	I hereby certify that the information contained herein is true and complete
			'	to the best of my launvectige and belief, and that this organization either
			ļ , , , , , , , , , , , , , , , , , , ,	owns a working interest or unleased mineral interest in the land including
1		•	· · · · · · · · · · · · · · · · · · ·	the proposed bottom hale focution or has a right to drill this well at this
1		'	<i>y</i>	location pursuum to a contract with an owner of such a mineral ar working
		!	1	interest, or to a voluntary pooling agreement or a compulsory pooling
1		!	ļ "	order heretofore uncred by the division.
				27/09/2013 Signature Date
		!		Ashley Martin Printed Name
				Ashley.Martin@conocophillips.com E-mail Address
				"SURVEYOR CERTIFICATION
1			1	I hereby certify that the well location shown on this
		. 1	1	plat was plotted from field notes of actual surveys
		!	(P	
		1	1	made by me or under my supervision, and that the
1705'			·	same is true and correct to the best of my belief.
	-1			Date of Survey
1	Ţ		1	
	1	J	1	Signature and Seal of Professional Surveyor:
1	13301	ļ	1	1
1614		-	1	i
ן דישו	4	ļ	1	i
1	867'	1	, · #	ı
			1	1 = 1 = 1 = 1
<i>i</i> '	1			Certificate Number
<u> </u>			4 J	L = ==.*



P.O. Box 750, Conroe, TX 77305 Phone: 936-441-7266

HÖBBS OCD

JUL 17 2013

ConocoPhillips

Ruby Federal No. 12 Lea County, NM RECEIVED

May 28, 2013

Job Number LNM 5103913

Survey Completion Report

Results of Directional Survey

n	
·	٠,

	AF	Pl number:	30-0	25-410	800	ļ				
		OGRID:			Operator:	CONOCOL	PHILLIPS	COMPANY	-	
					Property:	RUBY FE	DERAL			# 12
surface		ULSTR:	K		18	Ť	175		32E	_
uriace	,	ULSTR.	<u>jr</u>		10	1330			FWL	\dashv
BH Loc		ULSTR:	N		18	T	17S		32E	
	6924	MD	6	897.2	TVD	867	FSL	1614	FWL	
Top Perf/O		ULSTR:	ĸ		18	Т	178	R	32E	
	5390		_	372.1		1027			FWL	
Bot Perf/O	н	ULSTR:	N		18	T	17S	R	32E	

	MD	N/S	E/W	VD
	5374	-301.16	-55.98	5356.2
TOP PERFS/OH	5390	-302.85	-56.19	5372.11
	5464	-310.65	-57.16	5445.69
	6270	-401.24	-75.54	6246.36
BOT PERFS/OH	6329	-407.72	-77.13	6304.99
	6360	-411.13	-77.97	6335.79

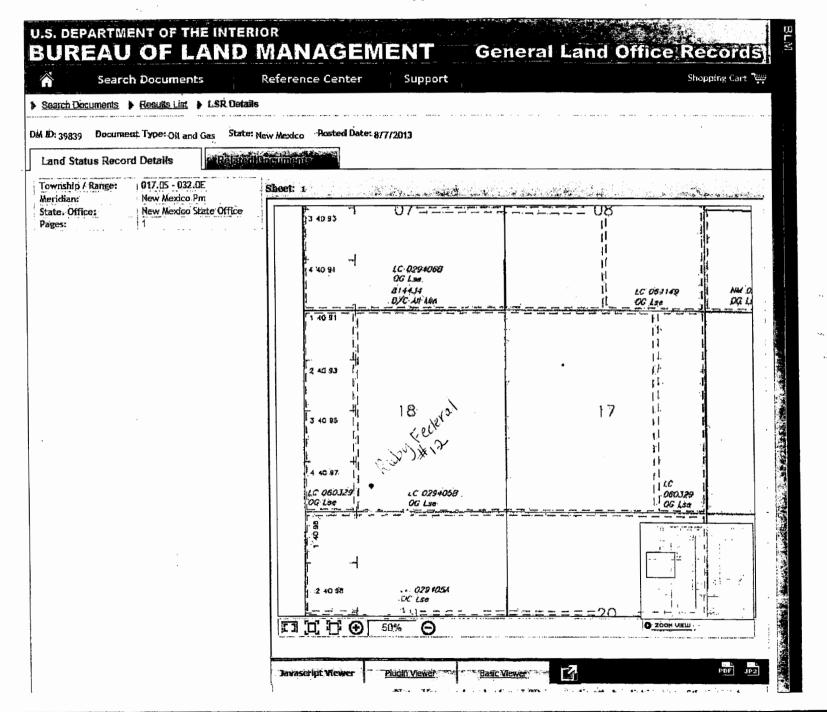
NEXT TO LAST	6871	-459.50	-89.55	6844.32
LAST READING	6924	-463.22	-90.66	6897.18
TD	6924	-463.22	- 90.66	6897.18

Surface Location	1330	FS	1705	FW
Projected BHL	867	FS	1614	FW
Location of				
Top Perfs/OH	1027	FS	1649	FW
Bottom Perfs/OH	922	FS	1628	FW

CLIMANA	DV of	Subcurface	acotione

			,			
Surface Location	K-18-17S-32E	1330	FS	1705	FW	Vert. Depth
	郑文林 《李文章				31X 178 31	28 77 82 F
Top Perfs/OH	K-18-17S-32E	1027	FS	1649	FW	5372.11
Bottom Perfs/OH	N-18-17S-32E	922	FS	1628	FW	6304.99
			THE STATE OF			
Projected TD	N-18-17S-32E	867	FS	1614	FW	6897.18

Website Image of Ruby and Emerald Lease Boundary With Approximate Well Location



COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION ■ Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. □ Agent ☐ Addressee Print your name and address on the reverse so that we can return the card to you. Date of Delivery Attach this card to the back of the mailplece, Z-10 ~l or on the front if space permits. ☐ Yes D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: □ No Cimarex Energy Co. of Colorado 600 N. Marienfield, Ste. 600 Midland, TX 79701 3. Service Type ☐ Certified Mail ☐ Express Mail Ruby 12 ☐ Registered ☐ Return Receipt for Merchandise ☐ C.O.D. ☐ Insured Mail 4. Restricted Delivery? (Extra Fee) ☐ Yes 7002 3150 0001 5967 3331 2. Article Number (Transfer from service label) PS Form 3811, August 2001 **Domestic Return Receipt** 102595-02-M-1540

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature	Agent □ Addressee
	B. Received by (Printed Name)	C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No	
Bureau of Land Management		
Carlsbad Field Office		
	The first control of the control of	
Carlsbad Field Office	3. Service Type Certified Mail Express M Registered Return Rec Insured Mail C.O.D.	ail Selpt for Merchandise
Carlsbad Field Office 620 East Greene Street	☐ Certified Mail ☐ Express M ☐ Registered ☐ Return Rec	
Carlsbad Field Office 620 East Greene Street	☐ Certified Mail ☐ Express M ☐ Registered ☐ Return Rec ☐ Insured Mail ☐ C.O.D.	Delpt for Merchandise