

State of New Mexico  
Energy, Minerals and Natural Resources Department

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Michelle Lujan Grisham  
Governor

Sarah Cottrell Propst  
Cabinet Secretary

Todd E. Leahy, JD, PhD  
Deputy Secretary

Gabriel Wade, Acting Director  
Oil Conservation Division



Administrative Order WFX-988  
March 15, 2019

**ADMINISTRATIVE ORDER  
OF THE OIL CONSERVATION DIVISION**

Under the provisions of Division Order R-2914 (as amended), Seely Oil Company (OGRID No. 20497) has made application to the Division for approval to add one additional injection well to its E-K Queen Unit (EKQU) Waterflood Project in the E-K; Yates-Seven Rivers-Queen Pool (Pool code 19950) in Lea County, New Mexico. This well is being proposed as an injection well into the Unitized interval, within the Queen formation of the EKQU.

**THE DIVISION DIRECTOR FINDS THAT:**

The application has been duly filed under the provisions of Division Rule 19.15.26.8(B) NMAC and satisfactory information has been provided that affected parties as defined in said rule have been notified and no objections remain outstanding. The subject well is eligible for conversion to injection under the terms of that rule. The applicant has presented satisfactory evidence that all requirements prescribed in Rule 19.15.26.8 NMAC have been met and the operator is in compliance with Rule 19.15.5.9 NMAC.

The proposed expansion of the above-referenced waterflood project, will prevent waste, is in the best interests of conservation, will not impair correlative rights, and should be approved.

**IT IS THEREFORE ORDERED THAT:**

Seely Oil Co., as operator, is hereby authorized to inject water into the following well for the purpose of secondary recovery through plastic-lined tubing set into a packer:

API No.	Well	Unit	Sec	Twp	Rng	Footage N/S	Footage E/W
30-025-36368	E-K Queen Unit No. 111	J	13	18 S	33 E	1650' FSL	2160' FEL

The approved injection interval for this well is into the Queen formation from an approximate perforated depth of 4360 feet to a maximum perforated depth of 4367 feet.

The approved injection interval (Unitized Formation) for the well is the Queen formation *"in the interval from the top of the Queen Sand or Artesia Red Sand member as is picked at 4,352 feet on the Gamma Ray-Neutron Log in the Carper Drilling Company's Carper-Sivley Well No. 9*

*(API No. 30-025-01634), now designated the E-K Queen Unit Well No. 19, located 1980 feet from the South line and 1650 feet from the East line (Unit J) of Section 24, Township 18 South, Range 33 East, NMPM, Lea County New Mexico, 200 feet downward. All depths are included in the Queen formation of the Guadalupian Series, a part of the Permian System, insofar as the same lies within the Unit Area.” [Source: Case No. 3255; Commissioner of Public Lands, State of New Mexico correspondence dated January 10, 2003 and titled “Re: Amendment to Unit Agreement, EK Queen Unit, Lea County, NM”.]*

The wellhead injection pressure on the well shall be limited to **no more than 872 psi**. In addition, the disposal well or system shall be equipped with a pressure limiting device in workable condition which shall, at all times, limit surface tubing pressure to the maximum allowable pressure for this well. The operator shall set the injection packer no more than 100 feet above the shallowest perforation for the permitted injection interval for the well in the application.

**IT IS FURTHER ORDERED THAT:**

The operator shall take all steps necessary to ensure that the injected fluid enters only the approved injection interval and is not permitted to escape to other formations or onto the surface.

After installing tubing, the casing-tubing annulus shall be loaded with an inert fluid and equipped with a pressure gauge or an approved leak detection device in order to determine leakage in the casing, tubing, or packer. The casing shall be pressure tested from the surface to the packer setting depth to assure casing integrity.

The well shall pass an initial mechanical integrity test (“MIT”) prior to initially commencing injection and prior to resuming injection each time any injection packer is unseated. All MIT testing procedures and schedules shall follow the requirements in Rule 19.15.26.11(A) NMAC. The Division Director retains the right to require at any time wireline verification of completion and packer setting depths in this well.

The wellhead injection pressure on this well shall be limited as listed above. In addition, the injection well or header system shall be equipped with a pressure limiting device in workable condition which shall, at all times, limit surface tubing pressures to the maximum allowable pressures for this well.

Subject to the limitations within the hearing order permitting this project, the Director of the Division may authorize an increase in tubing pressure upon a proper showing by the operator of said well that such higher pressure will not result in migration of the injected fluids from the approved injection interval. Such proper showing shall be demonstrated by sufficient evidence including but not limited to an acceptable Step-Rate Test.

The operator shall notify the supervisor of the Division’s District I office of the date and time of the installation of injection equipment and of any MIT test so that the same may be inspected and witnessed. The operator shall provide written notice of the date of commencement of injection to the District I office. The operator shall submit monthly reports of the disposal operations on Division Form C-115, in accordance with Rules 19.15.26.13 and 19.15.7.24 NMAC.

Without limitation on the duties of the operator as provided in Rules 19.15.29 and 19.15.30 NMAC, or otherwise, the operator shall immediately notify the District I office of any failure of the tubing, casing or packer in the approved injection well, or of any leakage or release of water, oil or gas from around any produced or plugged and abandoned well in the area, and shall take such measures as may be timely and necessary to correct such failure or leakage.

The injection authority granted under this order is not transferable except upon division approval. The division may require the operator to demonstrate mechanical integrity of any injection well that will be transferred prior to approving transfer of authority to inject.

The Division may revoke this injection permit after notice and hearing if the operator is in violation of Rule 19.15.5.9 NMAC.

Compliance with this order does not relieve the operator of the obligation to comply with other applicable federal, state or local laws or rules, or to exercise due care for the protection of fresh water, public health and safety and the environment.

PROVIDED FURTHER THAT, jurisdiction is retained by the Division for the entry of such further orders as may be necessary for the prevention of waste and/or protection of correlative rights or upon failure of the operator to conduct operations (1) to protect fresh or protectable waters or (2) consistent with the requirements in this order, whereupon the Division may, after notice and hearing, terminate the disposal authority granted herein. The subject well shall be governed by all provisions of Division Order No. R-2914, as amended, and associated administrative orders.

The injection authority granted herein shall terminate one (1) year after the effective date of this order if the operator has not commenced injection operations into the subject well, provided however, the Division, upon written request by the operator received prior to the one-year deadline, may grant an extension thereof for good cause shown.



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**GABRIEL WADE**  
Director

GW/mam

cc: New Mexico Oil Conservation Division – Hobbs  
Bureau of Land Management – Carlsbad  
Well File – 30-025-36368  
Case File No. 4746

RECEIVED: 09/06/2018	REVIEWER:	TYPE: WFX	APP NO: 9MAN18250 48669
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ABOVE THIS TABLE FOR OCD DIVISION USE ONLY

**NEW MEXICO OIL CONSERVATION DIVISION**  
 - Geological & Engineering Bureau -  
 1220 South St. Francis Drive, Santa Fe, NM 87505



**ADMINISTRATIVE APPLICATION CHECKLIST**

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND  
 REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

<b>Applicant:</b> Seely Oil Co.	<b>OGRID Number:</b> 20497
<b>Well Name:</b> E-K Queen Unit 111	<b>API:</b> 30-025-36368
<b>Pool:</b> E-K; Yates-Seven Rivers-Queen	<b>Pool Code:</b> 19950

**SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION  
 INDICATED BELOW**

- 1) **TYPE OF APPLICATION:** Check those which apply for [A]  
 A. Location – Spacing Unit – Simultaneous Dedication  
☐ NSL      ☐ NSP (PROJECT AREA)      ☐ NSP (PRORATION UNIT)      ☐ SD
- B. Check one only for [I] or [II]  
 [I] Commingling – Storage – Measurement  
☐ DHC    ☐ CTB    ☐ PLC    ☐ PC    ☐ OLS    ☐ OLM  
 [II] Injection – Disposal – Pressure Increase – Enhanced Oil Recovery  
☒ WFX    ☐ PMX    ☐ SWD    ☐ IPI    ☐ EOR    ☐ PPR

WFX-981

- 2) **NOTIFICATION REQUIRED TO:** Check those which apply.
- A. ☒ Offset operators or lease holders
  - B. ☐ Royalty, overriding royalty owners, revenue owners
  - C. ☒ Application requires published notice
  - D. ☒ Notification and/or concurrent approval by SLO
  - E. ☒ Notification and/or concurrent approval by BLM
  - F. ☒ Surface owner
  - G. ☒ For all of the above, proof of notification or publication is attached, and/or,
  - H. ☐ No notice required

**FOR OCD ONLY**

- ☐ Notice Complete
- ☐ Application  
Content  
Complete

- 3) **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate** and **complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

**Note: Statement must be completed by an individual with managerial and/or supervisory capacity.**

Brian Wood

Print or Type Name

*Brian Wood*

Signature

9-5-18

Date

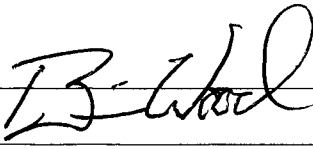
505 466-8120

Phone Number

brian@permitswest.com

e-mail Address

**APPLICATION FOR AUTHORIZATION TO INJECT**

- I. PURPOSE: XXX Secondary Recovery          Pressure Maintenance          Disposal          Storage  
Application qualifies for administrative approval? XXX Yes          No
- II. OPERATOR: SEELY OIL CO.  
ADDRESS: 815 WEST 10TH ST., FT. WORTH, TX 76102  
CONTACT PARTY: BRIAN WOOD (PERMITS WEST, INC.) PHONE: 505 466-8120
- 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 XXX No  
If yes, give the Division order number authorizing the project: R-2913 & R-2914
- 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.  
**E-K QUEEN UNIT 111**
- VII. Attach data on the proposed operation, including: **30-025-36368**
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 geologic data on the injection zone including appropriate lithologic detail, geologic 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 sources 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 sources 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: BRIAN WOOD  TITLE: CONSULTANT  
SIGNATURE:          DATE: AUG. 20, 2018  
E-MAIL ADDRESS: brian@permitswest.com
- \* If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted. Please show the date and circumstances 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 the 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, 1220 South St. Francis Dr., Santa Fe, New Mexico 87505, within 15 days.

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

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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.

## INJECTION WELL DATA SHEET

OPERATOR: SEELY OIL CO.

WELL NAME &amp; NUMBER: E-K QUEEN UNIT 111

WELL LOCATION: 1650' FSL &amp; 2160' FEL

J

FOOTAGE LOCATION

UNIT LETTER

13

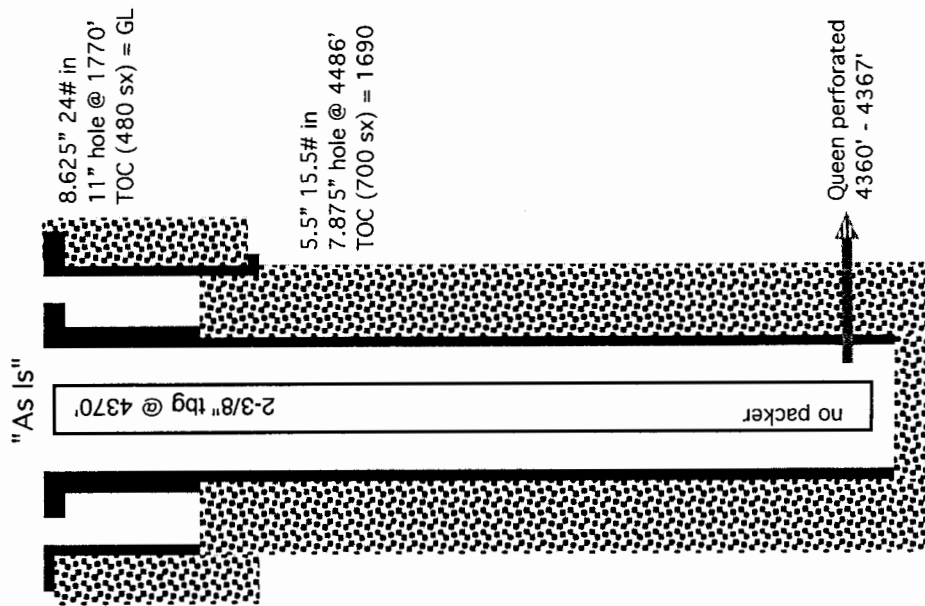
SECTION

18 S

TOWNSHIP

33 E

RANGE

WELLBORE SCHEMATICWELL CONSTRUCTION DATASurface Casing

Hole Size: 11" Casing Size: 8.625"

Cemented with: 480 sx. or ft<sup>3</sup>

Top of Cement: SURFACE Method Determined: CIRCULATED

Intermediate Casing

Hole Size: Casing Size:

Cemented with: sx. or ft<sup>3</sup>

Top of Cement: Method Determined:

Production Casing

Hole Size: 7.875" Casing Size: 5.5"

Cemented with: 700 sx. or ft<sup>3</sup>

Top of Cement: 1690' Method Determined: CALCULATED

Total Depth: 4487'

Injection Interval

PBTD 4409'

TD 4487'

4360 feet to 4367'

(not to scale)

(Perforated ~~or Open Hole~~; indicate which)

■■■■■■■■■■

## INJECTION WELL DATA SHEET

OPERATOR: SEELY OIL CO.

WELL NAME &amp; NUMBER: E-K QUEEN UNIT 111

WELL LOCATION: 1650' FSL &amp; 2160' FEL

J

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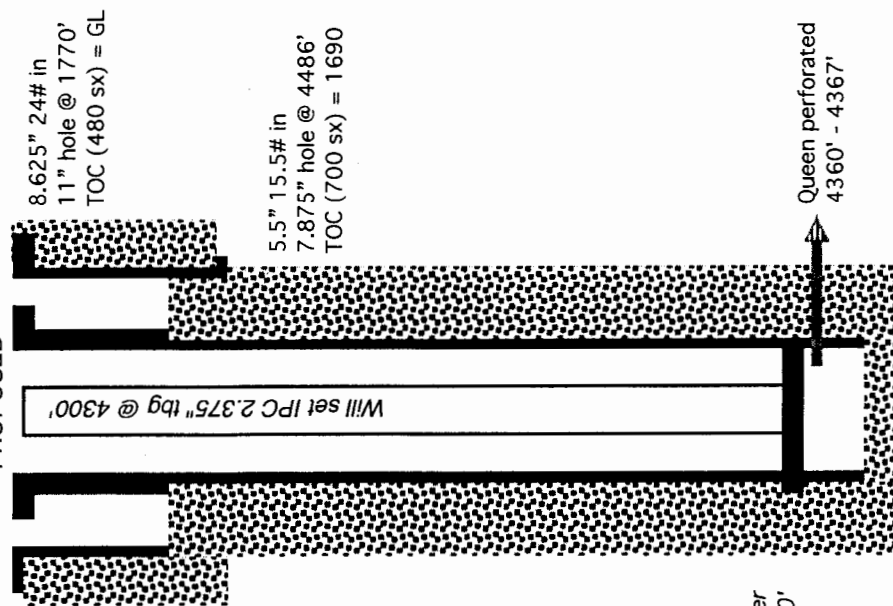
SECTION

TOWNSHIP

RANGE

WELLBORE SCHEMATICWELL CONSTRUCTION DATASurface Casing

PROPOSED



Hole Size: 11"

Casing Size: 8.625"

Cemented with: 480 sx.

or ft<sup>3</sup>

Top of Cement: SURFACE

Method Determined: CIRCULATED

Intermediate Casing

Hole Size:

Casing Size:

Cemented with: sx.

or ft<sup>3</sup>

Top of Cement:

Method Determined:

Production Casing

Hole Size:

Casing Size: 5.5"

Cemented with: 700 sx.

or ft<sup>3</sup>

Top of Cement: 1690'

Method Determined: CALCULATED

Total Depth: 4487'

Injection Interval

4360 feet to 4367'

(not to scale)

(Perforated or ~~Open Hole~~; indicate which)

■■■■■■■■■■



INJECTION WELL DATA SHEET

Tubing Size: 2-3/8" J-55 4.7# Lining Material: INTERNAL PLASTIC COAT

Type of Packer: PLASTIC LINED AD-I

Packer Setting Depth: 4300'

Other Type of Tubing/Casing Seal (if applicable): \_\_\_\_\_

Additional Data

1. Is this a new well drilled for injection? \_\_\_\_\_ Yes xxx No

If no, for what purpose was the well originally drilled? QUEEN OIL WELL

2. Name of the Injection Formation: QUEEN
3. Name of Field or Pool (if applicable): E-K; YATES-SEVEN RIVERS-QUEEN (POOL CODE 19950)

4. Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail, i.e. sacks of cement or plug(s) used. \_\_\_\_\_

NO - WILL USE EXISTING PERFS (4360' - 4367')

5. Give the name and depths of any oil or gas zones underlying or overlying the proposed injection zone in this area: \_\_\_\_\_

OVER: YATES (3170') & SEVEN RIVERS (3576')

UNDER: DELWARE (5300') & BONE SPRING (8300')

SEELY OIL CO.  
E-K QUEEN UNIT 111  
1650' FSL & 2160' FEL  
SEC. 13, T. 18 S., R. 33 E.  
LEA COUNTY, NM

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I. Plan is to convert a 4487' deep oil well to a water injection well to increase oil recovery. The well will inject through existing perforations (4360' - 4367') into the Queen, which is in the E-K; Yates-Seven Rivers-Queen Pool (pool code 19950). The well and zone are in the E-K Queen Unit. Unit and waterflood were established by Socony Mobil in 1965 via Orders R-2913 and R-2914. There have been 2 subsequent WFX approvals (-474 and -807). This is an active water flood. Nine water injectors are in the Unit.

II. Operator: Seely Oil Co. (OGRID 20497)  
Operator phone number: (817) 332-1377  
Operator address: 815 West 10<sup>th</sup> St., Ft. Worth TX 76102  
Contact for Application: Brian Wood (Permits West, Inc.)  
Phone: (505) 466-8120

III. A. (1) Lease: BLM NMLC-063645  
Lease Size: 800 acres (see Exhibit A for maps and C-102)  
Closest Lease Line: 480'  
Lease Area: E2 of Section 13, T. 18 S., R. 33 E. et al  
Unit Number: 300120  
Unit Size: 2,895.36 acres  
Closest Unit Line: 4575'  
Unit Area: T. 18 S., R. 33 E.  
Sections 13 & 14: all  
Section 23: N2 & N2SE4  
Section 24: N2, N2SW4, SESW, & SE4  
T. 18 S., R. 34 E.  
Section 18: NWNW, S2NW4, SW4, & W2SE4  
Section 19: NW4, N2SW4, & SWSW

SEELY OIL CO.  
E-K QUEEN UNIT 111  
1650' FSL & 2160' FEL  
SEC. 13, T. 18 S., R. 33 E.  
LEA COUNTY, NM

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- A. (2) Surface casing (8.625", 24#, J-55) was set at 1770' in an 11" hole with 480 sacks. Circulated to GL.

Production casing (5.5", 15.5#, J-55) was set at 4486' in a 7.875" hole and cemented with 700 sacks to 1690' (calculated).

Mechanical integrity of the casing will be assured by hydraulically pressure testing to a minimum of 500 psi for 30 minutes or to 300 psi for 60 minutes.

- A. (3) Tubing will be 2.375" IPC. Setting depth will be  $\approx$ 4300'. (Injection interval will be 4360' to 4367'.)
- A. (4) A plastic lined AD-I packer will be set at  $\approx$ 4300', or no more than 100' above the highest perforation (4360').
- B. (1) Injection zone will be the Queen sandstone, part of the E-K; Yates - Seven Rivers - Queen Pool. Reservoir is a stratigraphic trap. Average porosity = 13.3%. Average permeability = 30 mD. Average fracture gradient = 0.94 psi/foot. Water saturation was estimated as 40% before the waterflood started.
- B. (2) Injection interval will be 4360' to 4367'. The well is a cased hole.
- B. (3) Well was drilled and completed in 2003 as a 4487' deep Queen oil well and plugged back to 4409'.
- B. (4) Well was perforated in 2003 from 4360' to 4367' with fifteen 0.4" shots. This same interval will be used for injection.
- B. (5) Next higher oil or gas zone in the area of review is the Seven Rivers. Its bottom is at 4325'. Highest Queen perforation will be 4360'. (A typo is in the Completion Report. Queen top is at 4326' RKB.)

SEELY OIL CO.  
E-K QUEEN UNIT 111  
1650' FSL & 2160' FEL  
SEC. 13, T. 18 S., R. 33 E.  
LEA COUNTY, NM

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Next lower oil or gas zone in the area of review is the Delaware. Delaware top is at  $\approx 5300'$ . Deepest perforation will be 4367'.

IV. This is not a horizontal or vertical expansion of an existing injection project (R-2913 and R-2914). There have been 2 subsequent water flood expansions. The vertical contraction (R-2913-A) of the Unit excluded the Penrose.

V. Exhibit B shows 15 existing wells (2 water injection wells + 3 oil wells + 10 P&A wells) within a half-mile radius, regardless of depth. Exhibit C shows 245 existing wells (103 P & A wells + 101 oil or gas wells + 18 injection or disposal wells + 23 water wells) within a two-mile radius.

Exhibits D and E shows and details all leases (BLM, State, and fee) within a half-mile (D) radius and two-mile (E) radius.

VI. Fifteen wells are within a half-mile radius. All fifteen wells penetrated the Queen. A table abstracting the well construction details and histories of the penetrators is in Exhibit F. Diagrams of the P&A penetrators are in Exhibit G, sequenced by API number.

- VII.
1. Average injection rate will be  $\approx 100$  bwpd.  
Maximum injection rate will be 150 bwpd.
  2. System will be closed. Well will tie into the Unit pipeline system.
  3. Average injection pressure will be  $\approx 800$  psi. Maximum injection pressure will be 872 psi ( $= 0.2$  psi/foot  $\times 4360'$  (top perforation)).
  4. Water source will be produced water from Seely wells. No compatibility problems have reported from the  $>4,955,122$  barrels that have been injected in the Unit to date.
  5. The Queen currently produces from seven oil wells in the Unit, three of which are within a half-mile. Project goal is to recover more oil.

SEELY OIL CO.  
E-K QUEEN UNIT 111  
1650' FSL & 2160' FEL  
SEC. 13, T. 18 S., R. 33 E.  
LEA COUNTY, NM

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VIII. The Queen in the Unit is a sandstone stratigraphic trap with an average porosity of 13.3%. Average permeability is 30 millidarcies. There are currently 450 Queen injection wells in the state. The E-K Queen Unit shares its northeast border with Seely's Central EK Unit which has a similar water flood.

Formation depths are:

Quaternary = 0'  
Rustler = 1695'  
Top Salt = 1895'  
Base Salt = 2964'  
Yates = 3170'  
Seven Rivers = 3576'  
Queen = 4326'  
Total Depth = 4487'

State Engineer (Exhibit H) records indicate ten water wells are within a mile. None could be definitively found during a June 14, 2018 field inspection. Two sources were sampled (Exhibit H) on that day. A windmill, 0.98 mile NNE, appears to be L 06347, 02878, or 13406. A second sample point was 2.4 miles NNW.

Deepest water well within a mile (1610 meter) radius is 220'. No existing underground drinking water source is below the injection interval within a mile radius. The well is 0.7 mile southwest of the Ogallala aquifer. Most of the ten wells plot outside the Ogallala boundary. Both sampled wells are inside the Ogallala.

There will be 2631' of vertical separation and 1269' of salt and anhydrite between the bottom of the only likely underground fresh water source (red beds) and the top of the Queen.

Produced water is currently being injected (9 wells) or disposed (2 wells) into the Bone Spring, Delaware, Penrose, or Queen in T. 18 S., R. 33 E.

IX. The well will be stimulated with gelled KCL and sand.

X. DLL - Micro Guard and Spectral Density - Dual Spaced Neutron logs are on file with NMOCD.

SEELY OIL CO.  
E-K QUEEN UNIT 111  
1650' FSL & 2160' FEL  
SEC. 13, T. 18 S., R. 33 E.  
LEA COUNTY, NM

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XI. One active fresh water well is within a mile. Analyses from that windmill (0.98 mile NNE) and a stock tank (2.4 miles NNW) are attached (Exhibit H).

XII. Seely Oil Co. is not aware of any geologic or engineering data that may indicate the injection interval is in hydrologic connection with any underground source of water (Exhibit I). There are 450 Queen injectors and 25 SWD wells in New Mexico. Previously approved water flood expansions in the Unit include WFX-474 and WFX-807.

XIII. A legal ad (see Exhibit J) was published on August 1, 2018. Notice (this application) has been sent (Exhibit K) to the surface owner (BLM), government lessors (BLM, NMSLO), offset Queen operators (only Seely), other zone operators (only COG & Devon), lessees of record (ConocoPhillips, PXP, Seely, ZPZ), and operating rights holders (Apache Corp., Bellwether Exploration, Black Shale Minerals, Boswell Interests, P D Boswell Trust, Burnett Oil, CEB Oil, Lynn Charuk, Mitchel Cheney, Chisos Ltd., COG Operating, Concho Oil & Gas, Amy Dahlin Trust, Merlyn Dahlin, Ruth Dahlin, Devon Energy, EAB Oil, Express Air Drilling, Kathleen & Michael Havel, Dawn & David Henderson, Hill Houston Trust, Hunt Cimarron Trust, Woody Hunt, John P Oil Co., Merlyn Kahlin, Magnum Hunter, Manix Energy, Marbob, Mobil Producing TX & NM, J C Pace Oil & Gas, Petrohawk, PVB Oil, PXP Gulf Coast, Ridge Runner, Santa Fe Exploration, Santa Fe Snyder, C. W. Seely, Ina Seely, SSV & H Associates, Thompson & Thompson, Trigg Oil & Gas, Wes-Tex Drilling, Wright Family Trust).

## DISTRICT I

1625 N. French Dr., Hobbs, NM 88240

## DISTRICT II

811 South First, Artesia, NM 88210

## DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

## DISTRICT IV

2040 South Pacheco, Santa Fe, NM 87505

## State of New Mexico

Energy, Minerals and Natural Resources Department

EXHIBIT A

Form C-102

Revised March 17, 1999

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

## OIL CONSERVATION DIVISION

2040 South Pacheco

Santa Fe, New Mexico 87504-2088

□ AMENDED REPORT

## WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number <b>30-025-36368</b>	Pool Code <b>19950</b>	Pool Name <b>E-K Yates, 7 Rivers, Queen</b>
Property Code <b>22434</b>	Property Name <b>E-K QUEEN UNIT</b>	Well Number <b>111</b>
OGRID No. <b>20497</b>	Operator Name <b>SEELY OIL COMPANY</b>	Elevation <b>3959'</b>

## Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
J	13	18 S	33 E		1650'	SOUTH	2160'	EAST	LEA

## 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
Dedicated Acres <b>40</b>	Joint or Infill	Consolidation Code	Order No.						

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

	<b>OPERATOR CERTIFICATION</b>  I hereby certify the the information contained herein is true and complete to the best of my knowledge and belief.  <u>George R. Smith</u> Signature George R. Smith, agent for Printed Name Seely Oil Co. Title June 26, 2003 Date	
	<b>SURVEYOR CERTIFICATION</b>  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.  JUNE 10 2003 Date Surveyed Signature & Seal of Professional Surveyor W.O. No. 3338 Certificate No. 7977 JLP BASIN SURVEYS	



WGS84 103.60000° W

32.76667° N

32.7500° N

32 7500° N

32 73333° N

1000000

---

1

103.63333° W

103.61667° W

WGS84 103.60000° W

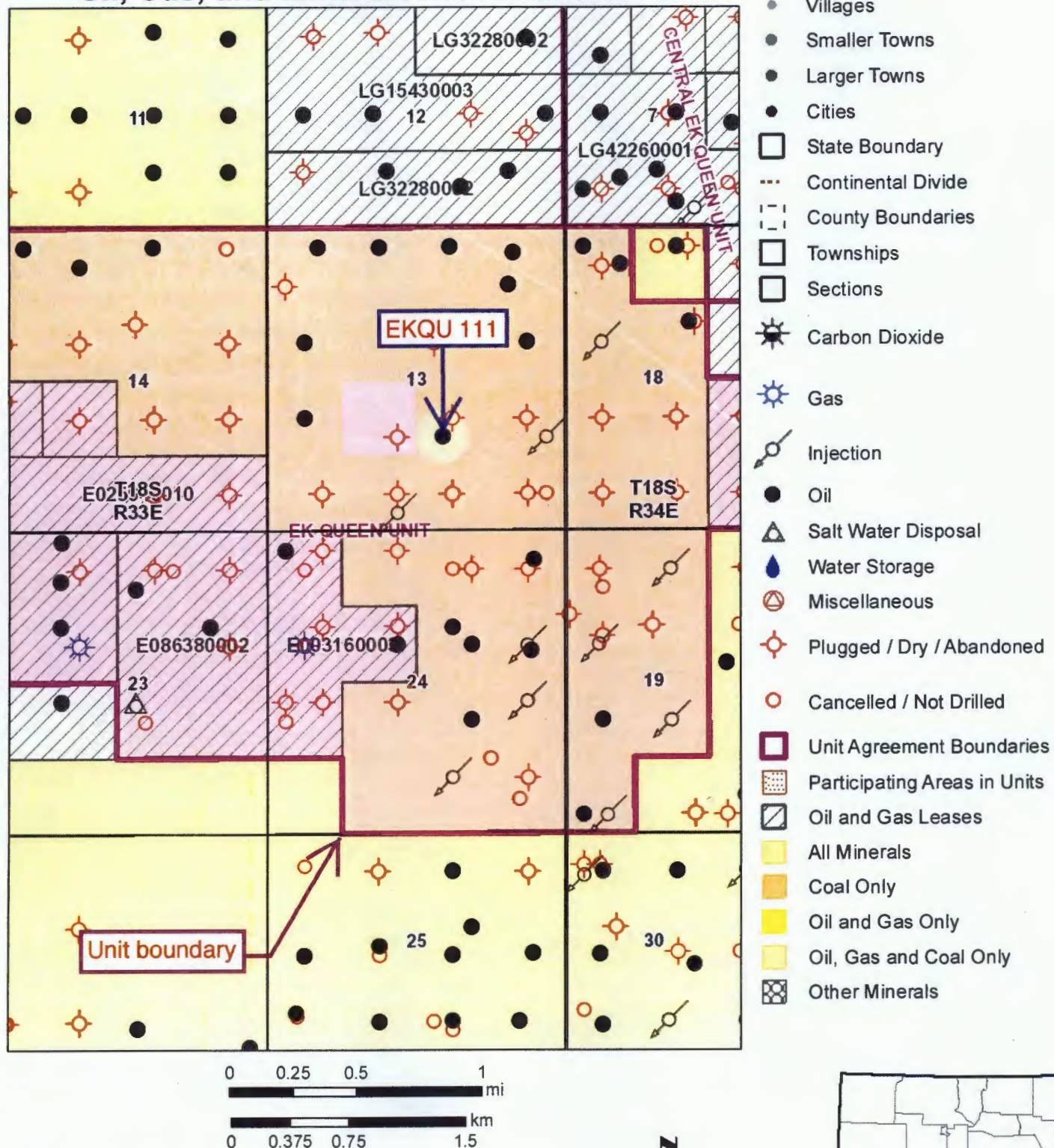


08/05/18





## Oil, Gas, and Minerals Leases and Wells



**Disclaimer:**  
The New Mexico State Land Office assumes no responsibility or liability for, or in connection with the accuracy, reliability or use of the information provided herein with respect to State Land Office data or data from other sources.

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EXHIBIT B

EKQU 111

1/2 mile radius

LEGEND

- New
- + Active
- + HRZ
- ⊙ BHL
- ⊕ P&A
- ⊙ INJ
- ⊙ SWD
- ⊙ Water

Quad: IRONHOUSE WELL  
Scale: 1 inch = 2,000 ft.

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SORTED BY DISTANCE FROM EKQU 111

API	WHO	UNIT- SECTION- T18S-R33E	TVD	WELL	STATUS	ZONE	FEET FROM EKQU 111
3002501602	Mobil	J-13	4408	EKQU 002	P&A	Queen	370
3002501605	Mobil	K-13	4615	EKQU 001	P&A	Queen	789
3002501603	Mobil	O-13	4378	EKQU 005	P&A	Queen	1006
3002501607	Mobil	N-13	4361	EKQU 003	P&A	Queen	1270
3002537587	Seely	N-13	4462	EKQU 619	WIW	Queen	1467
3002501604	Seely	I-13	4405	EKQU 006	P&A	Queen	1533
3002501606	T J Sivley	G-13	4369	Sivley 13 Federal 005	P&A	Queen	1656
3002501601	Mobil	P-13	4405	Carper Sivley 001	P&A	Queen	1792
3002535000	Seely	I-13	4700	EKQU 010	WIW	Queen	1828
3002529604	Seely	G-13	9300	EKQU 210	O	Queen	1982
3002501642	Mobil	C-24	4374	EKQU 002	P&A	Queen	2137
3002534325	Seely	H-13	4704	EKQU 029	O	Queen	2231
3002501608	Mobil	M-13	4355	EKQU 6 004	P&A	Queen	2340
3002501633	Mobil	B-24	4619	EKQU 1 004	P&A	Queen	2364
3002501609	Seely	L-13	4340	EKQU 613	O	Queen	2468
3002539741	Devon	A-24	5411	NM 24 Federal Com 003H	O	Delaware	2650



EXHIBIT C

EKQU 111

2 mile radius

LEGEND

- New
- ✦ Active
- ✦ HRZ
- ⊙ BHL
- ✦ P&A
- ⊙ INJ
- ⊙ SWD
- ⊙ Water

Quad: HOBBS  
Scale: 1 inch = 3,333 ft.

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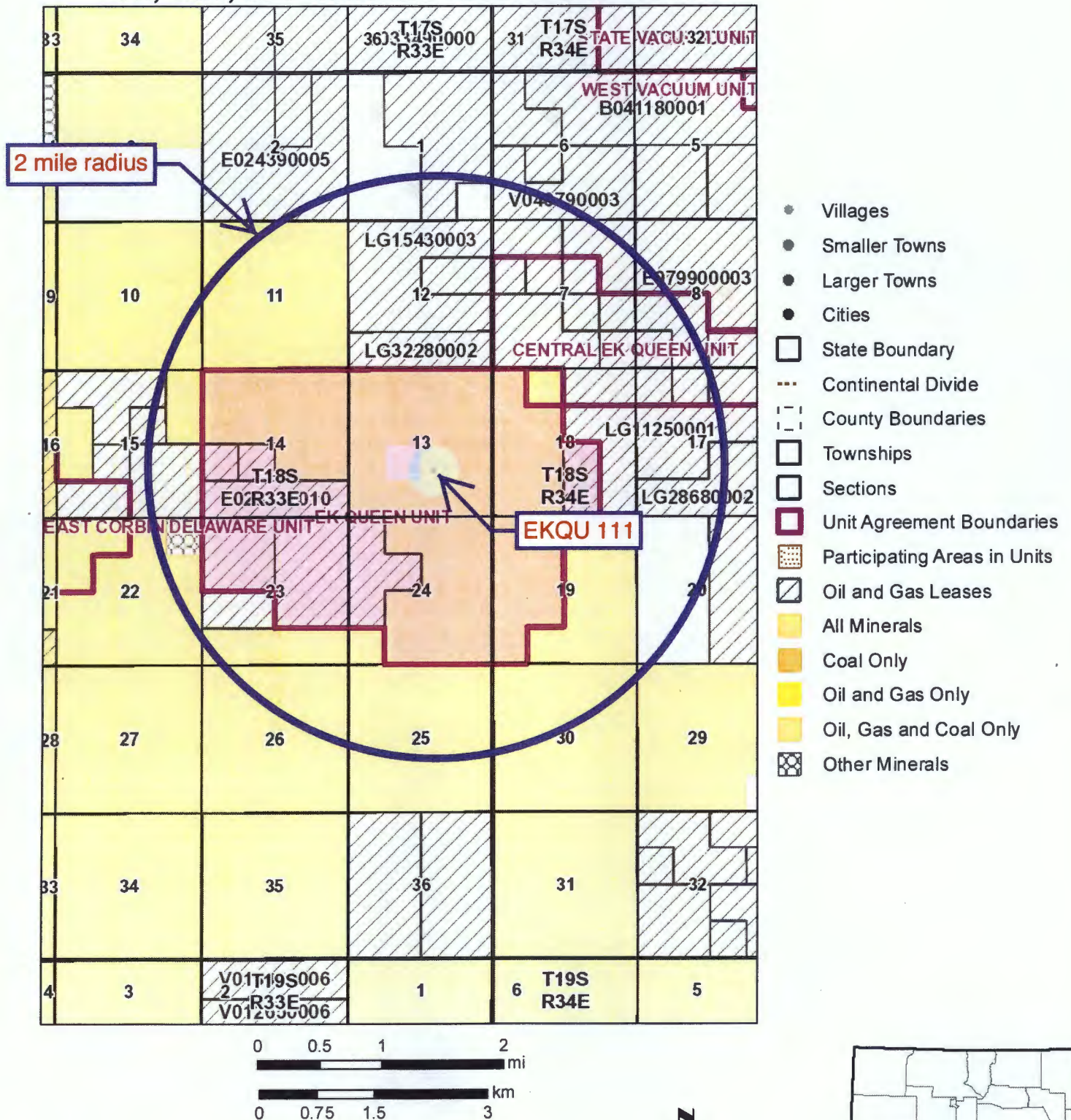
Aliquot Parts in Area of Review	Lessor	Lease	Lessee of Record	Well Operator(s)
SWNW 18-18s-34e	BLM	NMLC-065394B	PXP	Seely
W2SW4 18-18s-34e	BLM	NMLC-065394	ConocoPhillips	Seely
E2 13-18s-33e	BLM	NMLC-063645	Seely	Seely
NESW	fee	Swigart	Seely	Seely
E2NW4, SWNW, NWSW, & S2SW4 13-18s-33e	BLM	NMNM-004591	Seely	Seely
NENE & NENW 24-18s-33e	BLM	NMNM-004591	Seely	Seely & Devon
NWNE 24-18s-33e	BLM	NMLC-063645	Seely	Seely & Devon
NWNW 24-18s-33e	NMSLO	E0-0316-0003	ZPZ	COG







## Oil, Gas, and Minerals Leases and Wells



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Sorted by distance from EKQU 111

WELL	SPUD	TVD	ZONE	WELL STATUS	HOLE O. D.	CASING O. D.	SET @ FEET	CEMENT	TOC	HOW TOC DETERMINED
EKQU 002	7/12/55	4408	Queen	P&A	11	8.625	297	250 sx	GL	circ.
3002501602					7.875	5.5	4408	525 sx	932	calc.
J-13-18s-33e										
EKQU 001	5/1/55	4615	Queen	P&A	12.25	9.625	259	200 sx	GL	circ.
3002501605					7.875	5.5	4444	175 sx	3500	calc.
K-13-18s-33e										
EKQU 005	11/18/55	4378	Queen	P&A	10.25	8.625	292	175 sx	GL	circ.
3002501603					7.875	5.5	4378	550	1950	calc.
O-13-18s-33e										
EKQU 003	12/6/55	4361	Queen	P&A	no report	13.375	250	250	GL	circ.
3002501607					no report	8.625	1638	50	1532	calc.
N-13-18s-33e					7.875	5.5	4332	175 sx	3150	calc.
EKQU 619	1/18/06	4462	Queen	WIW	12.25	8.625	1635	510 sx	GL	circ. 95 sx
3002537587					7.875	5.5	4461	800 sx	GL	circ. 95 sx
N-13-18s-33e										
EKQU 006	5/11/56	4405	Queen	P&A	12.25	8.625	301	200 sx	GL	circ.
3002501604					no report	N/A	N/A	N/A	N/A	N/A
I-13-18s-33e										
Sivley 5 13	11/25/57	4369	Queen	P&A	12.25	8.625	335	175 sx	GL	circ.
3002501606					no report	N/A	N/A	N/A	N/A	N/A
G-13-18s-33e										



Sorted by distance from EKQU 111

WELL	SPUD	TVD	ZONE	WELL STATUS	HOLE O. D.	CASING O. D.	SET @ FEET	CEMENT	TOC	HOW TOC DETERMINED
Carper Sivley 1	10/4/54	4405	Queen	P&A	no report	8.625	1649	50 sx	GL	circ.
3002501601					no report	7	4375	125 sx	3340	CET log
P-13-18s-33e										
EKQU 010	4/16/00	4700	Queen	WIW	11	8.625	1715	585 sx	GL	circ. 160 sx
3002535000					7.875	5.5	4700	800 sx	920	CBL
I-13-18s-33e										
EKQU 210	10/26/85	9300	Queen	Oil	17.5	13.375	363	375 sx	GL	circ. 105 sx
3002529604					12.25	8.625	3241	900 sx	GL	circ. 100 sx
G-13-18s-33e					7.875	5.5	9300	1450 sx	500	temp. surv.
EKQU 002	10/22/55	4374	Queen	P&A	no report	13.375	250	200 sx	GL	circ.
3002501642					no report	8.625	1631	mud	N/A	N/A
C-24-18s-33e					no report	5.5	4349	250 sx	2445	calc.
EKQU 029	3/21/98	4704	Queen	Oil	11	8.625	1764	505 sx	GL	no report
3002534325					7.875	5.5	4703	795 sx	750	no report
H-13-18s-33e										
EKQU 6 004	1/13/56	4355	Queen	P&A	no report	13.375	250	250 sx	GL	circ.
3002501608					no report	8.625	1618	50 sx	1512	calc.
M-13-18s-33e					7.875	5.5	4334	250 sx	2918	CBL
EKQU 1 004	8/11/55	4619	Queen	P&A	no report	8.625	293	175 sx	GL	circ.
3002501633					no report	5.5	4618	550 sx	3985	calc.
B-24-18s-33e										

Sorted by distance from EKQU 111

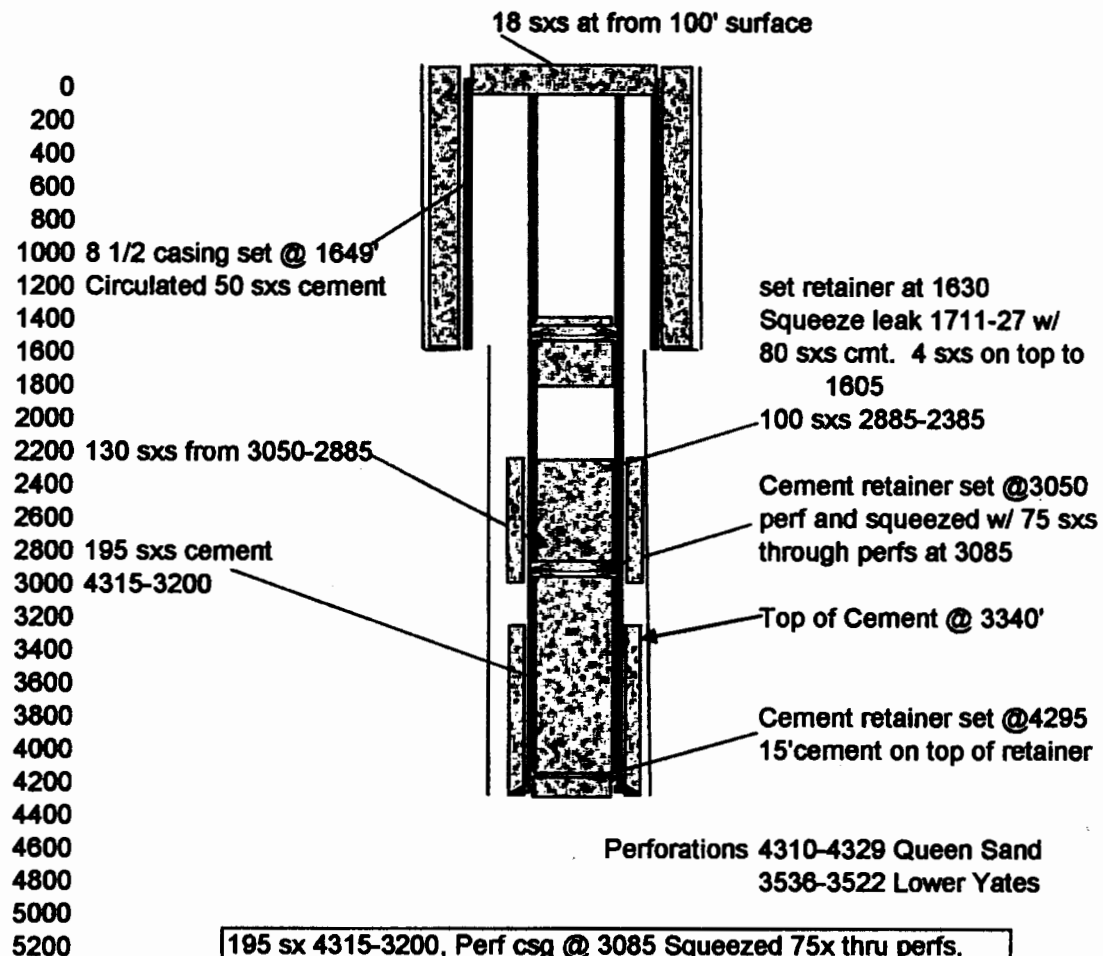
WELL	SPUD	TVD	ZONE	WELL STATUS	HOLE O. D.	CASING O. D.	SET @ FEET	CEMENT	TOC	HOW TOC DETERMINED
EKQU 613	2/9/57	4340	Queen	Oil	11.25	8.625	1617	50 sx	GL	circ.
3002501609					7.875	5.5	4282	200 sx	3140	CBL
L-13-18s-33e					no report	4.5	4340	50 sx	4266	TOL
NM 24 Federal Com 003H	11/11/10	5411	Delaware	Oil	17.5	13.375	1770	1100 sx	GL	circ. 245 sx
3002539741					12.25	9.625	3135	540 sx	GL	circ. 296 sx
A-24-18s-33e					8.75	5.5	8279 MD	140 sx	1280	CBL

30-025-01601  
 spud 10-4-54  
 P&A 12-22-83

EXHIBIT G

OPERATOR Seely Oil Company  
 WELL NO. 1

LEASE Carper Sivley Federal  
 660 FSL & 660 FEL  
 SECTION 13-18S-33E  
 UNIT LETTER P



195 sx 4315-3200, Perf csg @ 3085 Squeezed 75x thru perfs,  
 130 sx 3050-2300, 100 sx 2885-2380, set cem ret @ 1630.  
 Squeezed leak at 1711-27 w/ 80 sx, 4x on retainer. 18 sx 100' to  
 surface.

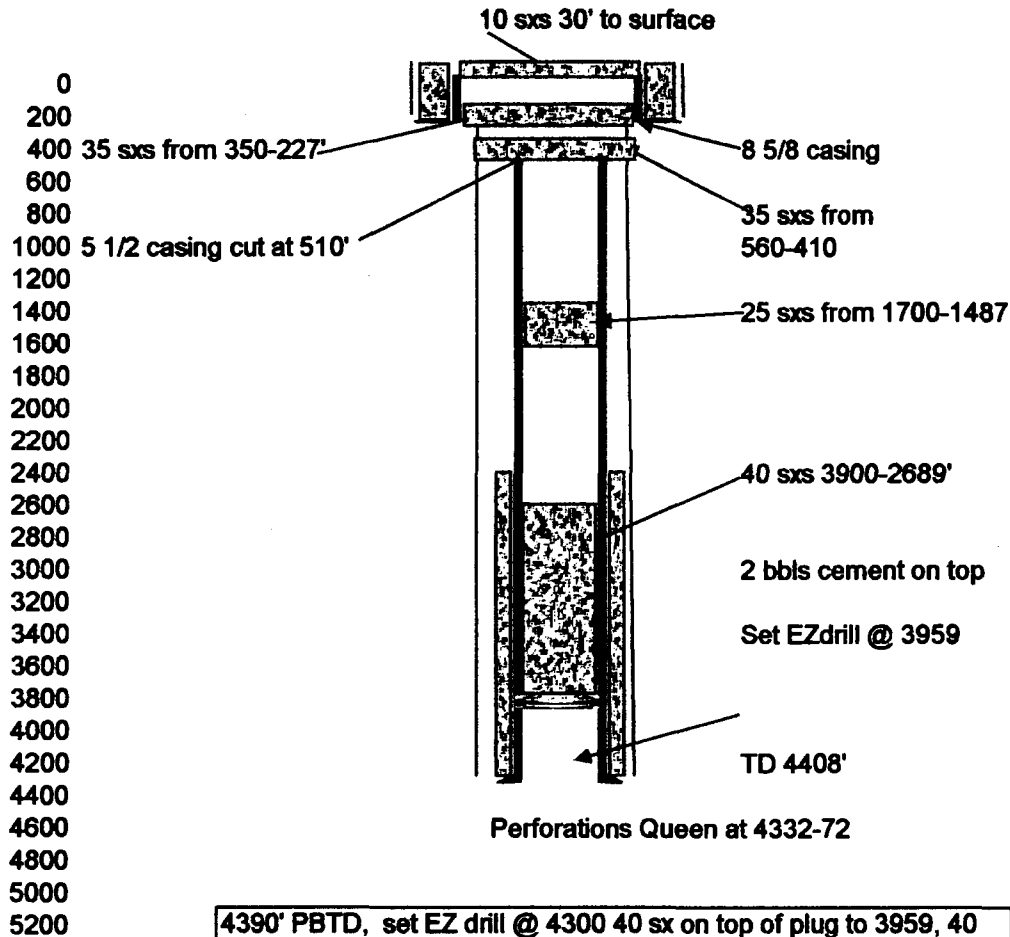
30-025-01602  
 spud 7-12-55  
 P&A 5-4-77

EXHIBIT G

**OPERATOR** Seely Oil Company  
**WELL NO.** 1-2

**LOC** **LEASE** EK Queen  
 1980 FSL & 1980 FEL

**SECTION** 13-18S-33E  
**UNIT LETTER** J



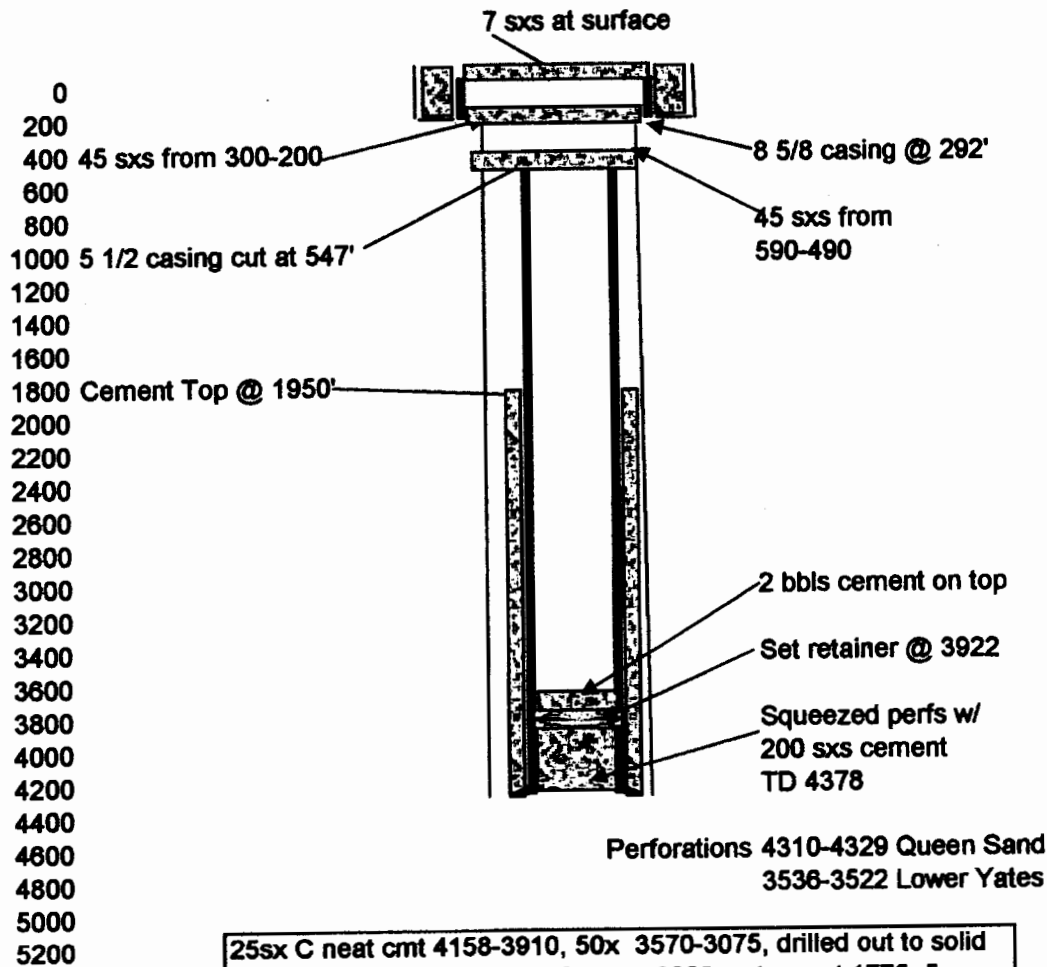
4390' PBTB, set EZ drill @ 4300 40 sx on top of plug to 3959, 40 sx from 3900-2689, cut 5 1/2' csg at 510, 25 sx from 1700-1487, 35 sx from 560-410, 35 sx from, 350-227, 10sx from 30 to surface  
 5/3/1977

30-025-01603  
 spud 11-18-55  
 P&A 2-3-81

EXHIBIT G

**OPERATOR** Seely Oil Company  
**WELL NO.** tr1 no.5

**LEASE** E-K Queen Unit  
**LOC** 660 FSL & 1980 FEL  
**SECTION** 13-18S-33E  
**UNIT LETTER** O



25sx C neat cmt 4158-3910, 50x 3570-3075, drilled out to solid cmt at 4127, CIBP @ 3915 95sx to 3000, cut csg at 1775. 5x 1620-1890, 50x 400-200, 20x 120 to surface

30-025-01604  
spud 5-11-56  
P&A 5-21-56

EXHIBIT G

OPERATOR  
WELL NO.

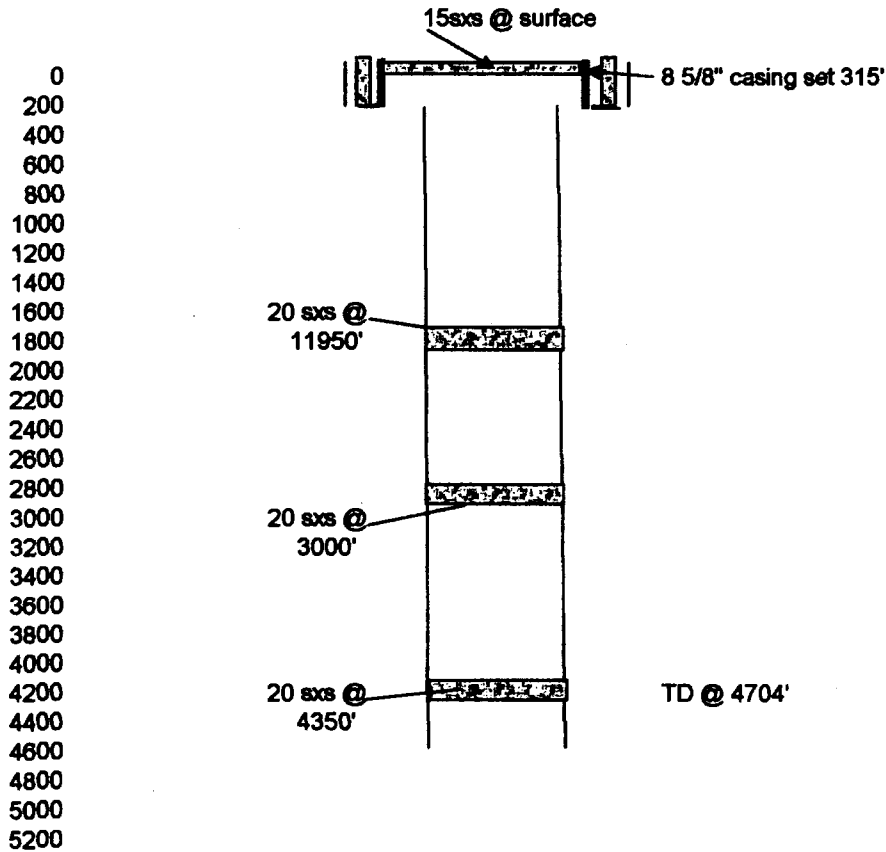
Seely Oil Company  
6

LOC

LEASE  
1980' FSL & 660 FEL

EK Queen Unit

SECTION 13-18S-33E  
UNIT LETTE i



20 sx cement @ 4350', 20 sx cement @ 3000', 20sx cement @ 1950, 15 sx at surface.

30-025-01605

spud 5-1-55

P&A 7-5-74

EXHIBIT G

**OPERATOR** Seely Oil Company

**WELL NO.** Tract 12-1

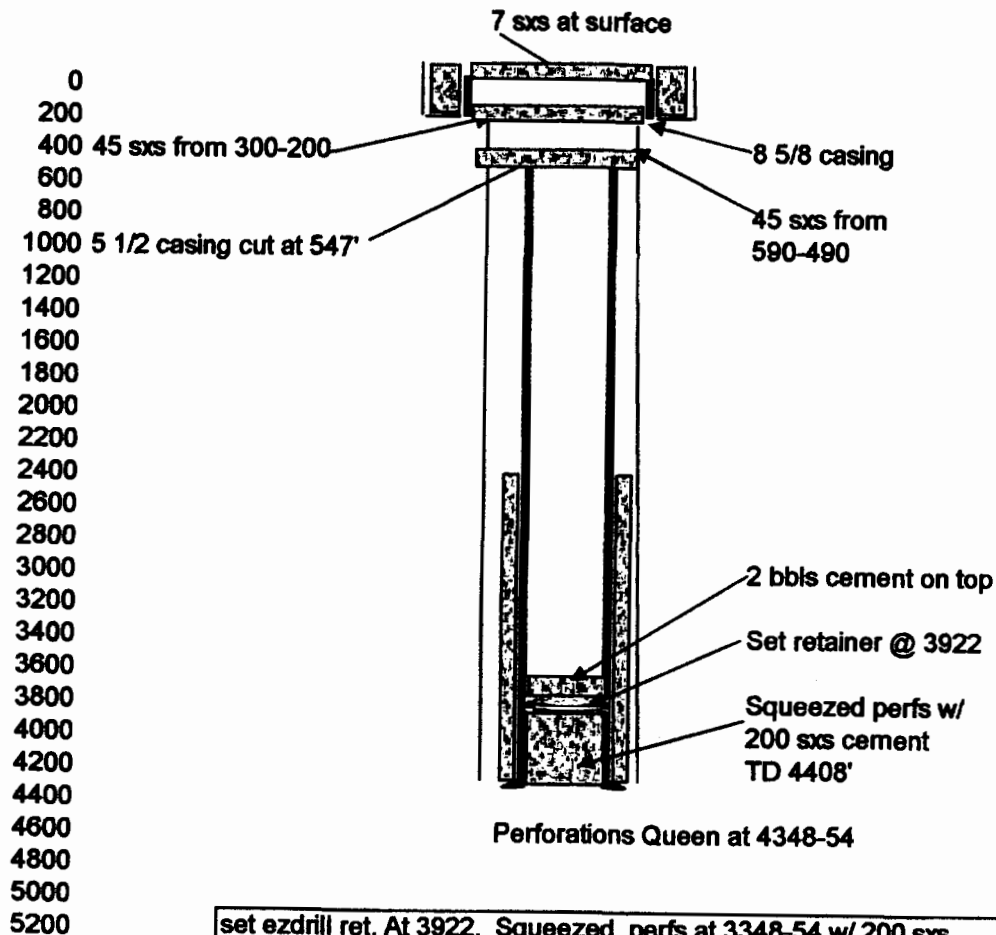
**LOC**

**LEASE** EK Queen

1610 FSL & 2310 FWL

**SECTION** 13-18S-33E

**UNIT LETTER** K



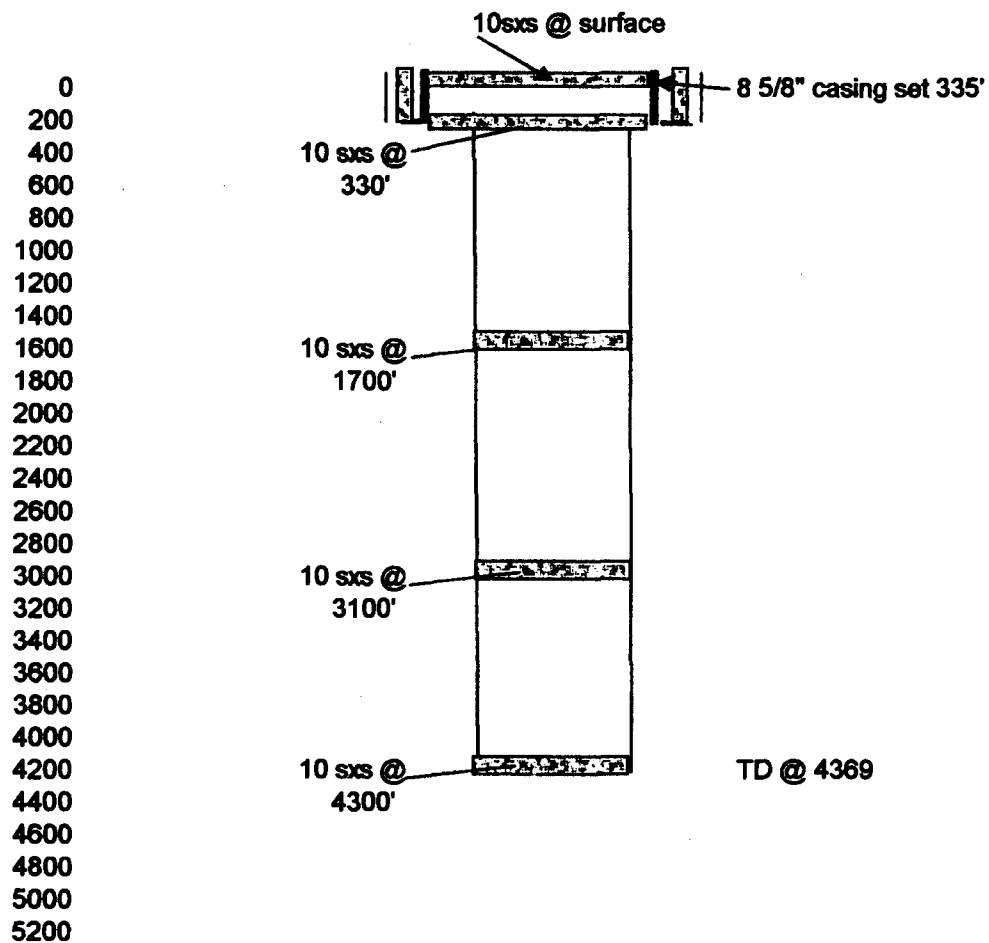
set ezdrill ret. At 3922. Squeezed perfs at 3348-54 w/ 200 sxs cement. 2 bbls on retainer. Cut csg at 547. 45 sxs cement 590-490, 45 sxs from 300-200, 7 sxs at surface.

30-025-01606  
spud 11-25-57  
P&A 12-12-57

EXHIBIT G

OPERATOR T.J. Silvey Federal  
WELL NO. 5

LEASE EK Queen Unit  
1980' FNL & 2310' FWL  
LOC SECTION 13-18S-33E  
UNIT LETTER G



10 sacks each at 4300', 3100', 1700', 330' and at surface



30-025-01607

spud 12-6-55

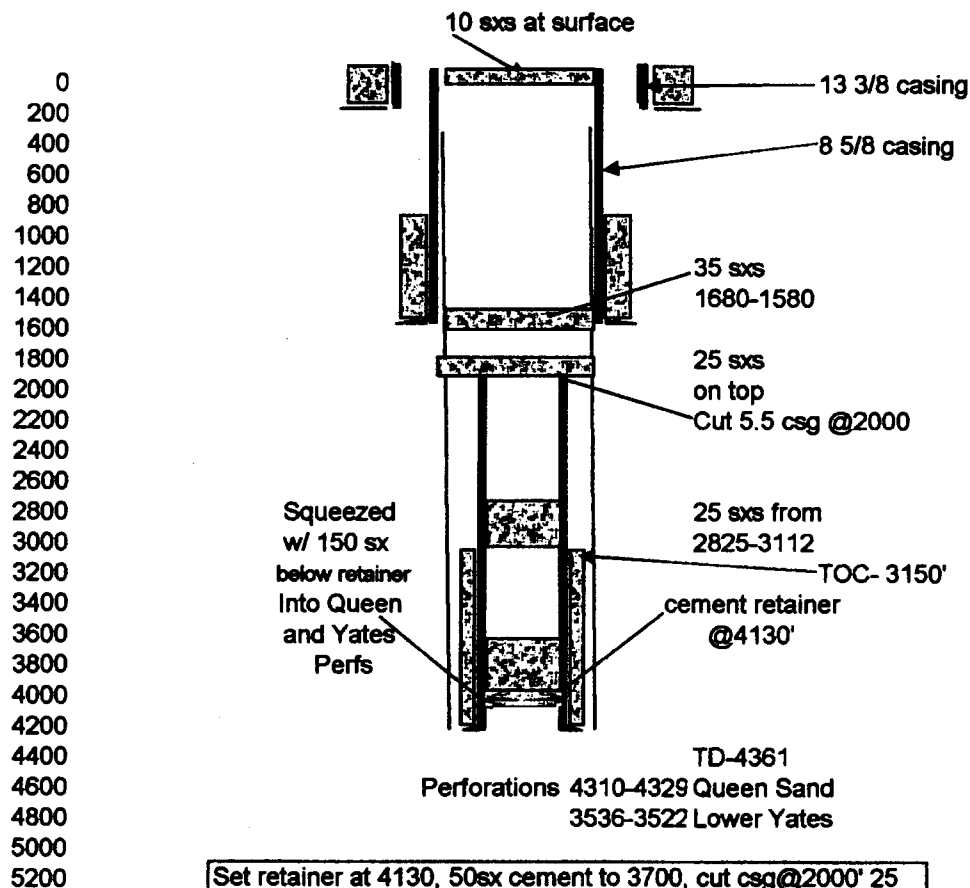
P&A 11-8-71

EXHIBIT G

OPERATOR Seely Oil Company

WELL NO. tr6 no.3

LEASE E-K Queen Unit  
660 FSL & 2310 FWL  
SECTION 13-18S-33E  
UNIT LETTER N



Set retainer at 4130, 50sx cement to 3700, cut csg@2000' 25  
sx cement on top. 35 sx 1680-1580, 10 sx cement at top

30-025-01608

spud 1-13-56

P&A 2-17-81

OPERATOR Seely Oil Company

WELL NO. tr6 no.4

LOC

LEASE

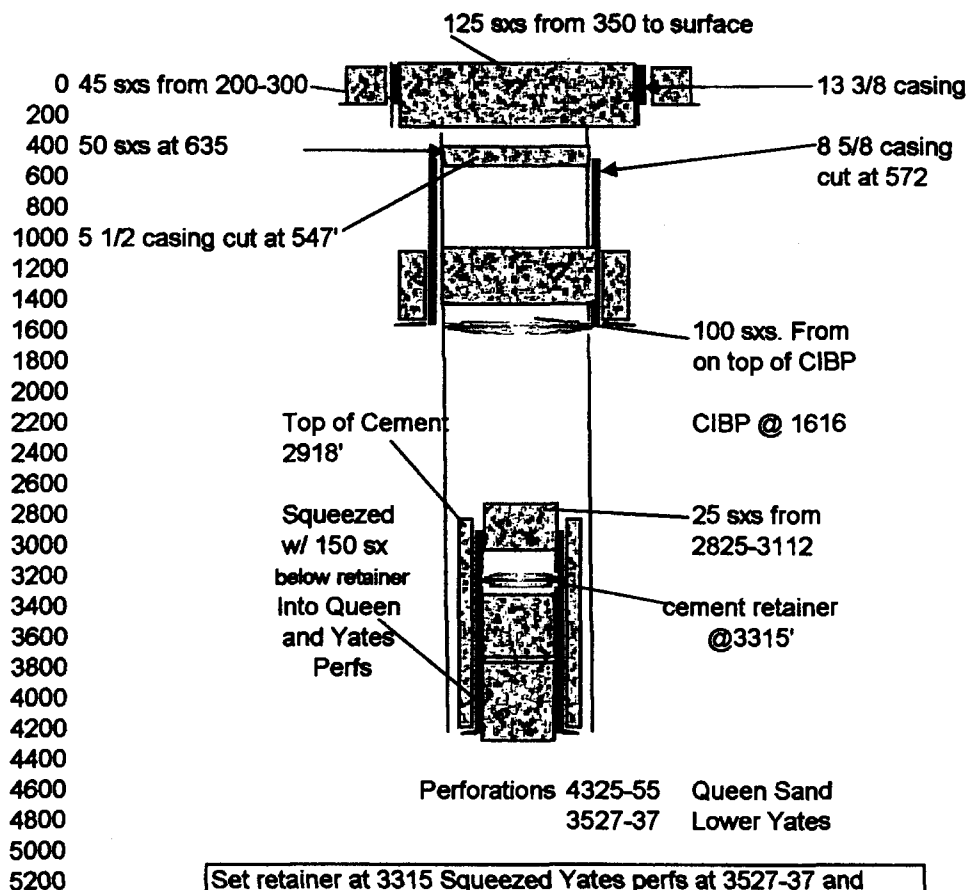
660 FSL & 990 FWL

SECTION  
UNIT LETTER

13-18S-33E

M

EXHIBIT G



Set retainer at 3315 Squeezed Yates perfs at 3527-37 and Queen at 4325-55 w/ 150 sx. 50sx @ 2825-3112, 50sx from 1500-1712', CIBP@1616 w 50 sx cement on top, 50 sx @ 635, 100sx@350, 25sx @ 30' to surface

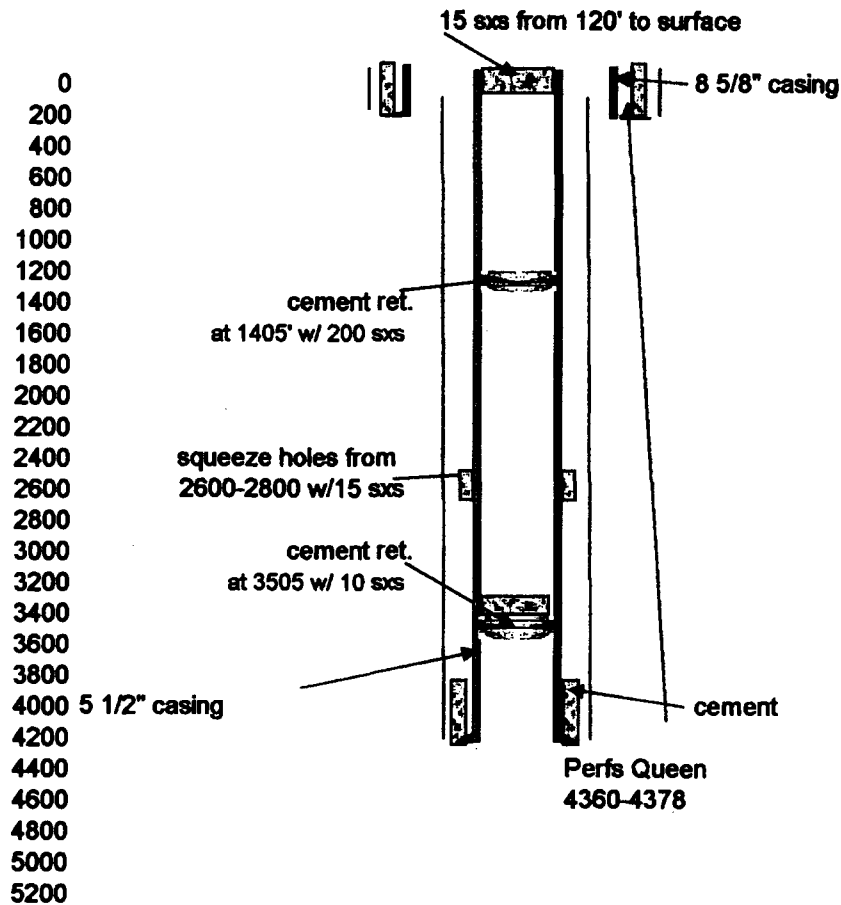
30-025-01633  
spud 8-11-55  
P&A 11-6-81

EXHIBIT G

OPERATOR Mobil Producing Co.  
WELL NO. 14

LOC 660 FNL & 1650 FEL  
LEASE EK Queen Unit

SECTION 24-18S-33E  
UNIT LETTER B



Cmt Ret @ 3505 w/ 10 sxs on top, 15 sxs 2600-2800, cmt ret @ 1405 w/ 200 sxs, 15 sxs 120 to surface

Perforations Queen- 4360-4378

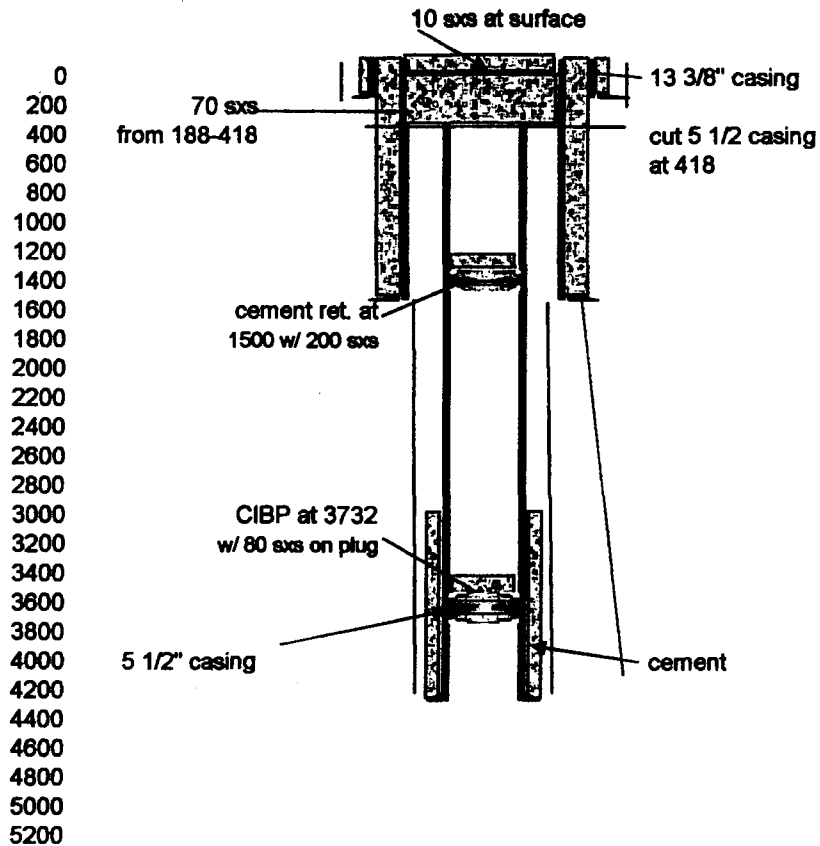
30-025-01642  
 spud 10-22-55  
 P&A 11-10-77

EXHIBIT G

OPERATOR Mobil Producing Co.  
 WELL NO. 62

LOC 330 FNL & 2310 FWL  
 LEASE EK Queen Unit

SECTION 24-18S-33E  
 UNIT LETTER c



CIBP @ 3732 w/ 80 sxs on plug. Cmt retainer @ 1500 squeezed w/200 sxs . Cut 5 1/2 @ 418 70 sxs 188 - 418 10 sxs @ surface



## Water Column/Average Depth to Water

(A CLW#### in the  
POD suffix indicates the  
POD has been replaced  
& no longer serves a  
water right file.)

(R=POD has been  
replaced,

O=orphaned,

C=the file is  
closed)

(quarters are 1=NW 2=NE 3=SW 4=SE)

(quarters are smallest to largest) (NAD83 UTM in meters)

(In feet)

POD Number	Code	POD Sub-basin	County	Q 64	Q 16	Q 4	Sec	Tws	Rng	X	Y	Distance	DepthWell	DepthWater	Water Column
<u>CP 00623 POD2</u>		CP	LE	1	2	1	13	18S	33E	629243	3624542	850	100		
<u>L 07429</u>		L	LE	1	1	1	19	18S	34E	630523	3623272*	970	149	105	44
<u>CP 00769 POD1</u>		CP	LE	1	1	2	13	18S	33E	629699	3624866*	1006	115	70	45
<u>CP 00623 POD1</u>		CP	LE	1	1	1	13	18S	33E	628895	3624852*	1310	82	60	22
<u>L 13406 POD1</u>		L	LE	4	4	4	12	18S	33E	630279	3625061	1310	220		
<u>CP 00691</u>		CP	LE	4	4	2	24	18S	33E	630327	3622662*	1329	215	195	20
<u>L 02878 POD2</u>		L	LE		4	4	12	18S	33E	630196	3625175	1386	220	220	0
<u>L 06347</u>		L	LE		4	4	12	18S	33E	630196	3625175*	1386	170	130	40
<u>L 08288</u>		L	LE	3	3	3	12	18S	33E	628890	3625054*	1471	79	60	19
<u>L 03436</u>		L	LE		1	4	18	18S	34E	631230	3623771	1480	170	125	45
<u>L 02898</u>	1 mile =	L	LE		3	3	07	18S	34E	630598	3625182*	1568	204	150	54
<u>CP 00072 POD6</u>	1610 m	CP	LE	2	4	4	11	18S	33E	628603	3625179	1749	100	61	39
<u>CP 00072 POD1</u>		CP	LE	2	3	4	11	18S	33E	628284	3625242*	2015	85		
<u>CP 00072 POD2</u>		CP	LE			4	11	18S	33E	628386	3625344	2016	90		
<u>CP 00072 POD5</u>		CP	LE	2	1	4	11	18S	33E	628219	3625573	2298	100	64	36
<u>L 10040</u>		L	LE		3	3	08	18S	34E	632170	3625205*	2766	215	145	70
<u>CP 00701 POD2</u>		CP	LE	4	1	3	11	18S	33E	627472	3625433*	2769	100		
<u>L 04953</u>		L	LE	4	3	3	08	18S	34E	632269	3625104*	2807	200	150	50
<u>CP 00701</u>		CP	LE		1	3	11	18S	33E	627373	3625534*	2908	100		
<u>CP 00072 POD3</u>		CP	LE	2	4	4	10	18S	33E	627076	3625223*	3002	70		
<u>L 13526 POD1</u>		L	LE	2	2	1	20	18S	34E	632769	3623271	3074	196	106	90
<u>L 10346</u>		L	LE			3	20	18S	34E	632425	3622187*	3153	130		
<u>L 10436</u>		L	LE			3	20	18S	34E	632425	3622187*	3153	120	80	40
<u>L 04898</u>		L	LE		4	3	06	18S	34E	630937	3626796*	3165	185	150	35
<u>CP 01584 POD1</u>		CP	LE	2	1	3	30	18S	34E	630654	3620788	3202	500		

Average Depth to Water: 116 feet

Minimum Depth: 60 feet

Maximum Depth: 220 feet

Record Count: 25

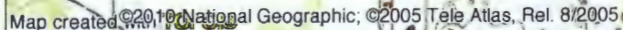
UTM NAD83 Radius Search (in meters):

Easting (X): 629752

Northing (Y): 3623861

Radius: 3220





**Hall Environmental Analysis Laboratory, Inc.****CLIENT:** Permits West**Client Sample ID:** Selly-EkQ-1**Project:** Seely Ek Queen H2O Wells**Collection Date:** 6/14/2018 2:30:00 PM**Lab ID:** 1806979-001**Matrix:** AQUEOUS**Received Date:** 6/15/2018 8:36:00 AM

Analyses	Result	PQL	Qual	Units	DF	Date Analyzed	Batch
<b>EPA METHOD 1664B</b>							Analyst: dbf
N-Hexane Extractable Material	ND	9.60		mg/L	1	6/18/2018 4:00:00 PM	38719
<b>EPA METHOD 300.0: ANIONS</b>							Analyst: MRA
Chloride	64	5.0		mg/L	10	6/28/2018 4:49:30 PM	R52361
<b>SM2540C MOD: TOTAL DISSOLVED SOLIDS</b>							Analyst: KS
Total Dissolved Solids	295	20.0		mg/L	1	6/21/2018 5:03:00 PM	38785

Refer to the QC Summary report and sample login checklist for flagged QC data and preservation information.

<b>Qualifiers:</b>	*	Value exceeds Maximum Contaminant Level.	B	Analyte detected in the associated Method Blank
	D	Sample Diluted Due to Matrix	E	Value above quantitation range
	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
	ND	Not Detected at the Reporting Limit	P	Sample pH Not In Range
	PQL	Practical Quantitative Limit	RL	Reporting Detection Limit
	S	% Recovery outside of range due to dilution or matrix	W	Sample container temperature is out of limit as specified

## Analytical Report

Lab Order 1806979

Date Reported: 7/5/2018

## Hall Environmental Analysis Laboratory, Inc.

CLIENT: Permits West

Client Sample ID: Selly-EkQ-2

Project: Seely Ek Queen H2O Wells

Collection Date: 6/14/2018 2:50:00 PM

Lab ID: 1806979-002

Matrix: AQUEOUS

Received Date: 6/15/2018 8:36:00 AM

Analyses	Result	PQL	Qual	Units	DF	Date Analyzed	Batch
<b>EPA METHOD 1664B</b>							Analyst: dbf
N-Hexane Extractable Material	ND	9.58		mg/L	1	6/18/2018 4:00:00 PM	38719
<b>EPA METHOD 300.0: ANIONS</b>							Analyst: MRA
Chloride	120	5.0		mg/L	10	6/28/2018 6:06:40 PM	R52361
<b>SM2540C MOD: TOTAL DISSOLVED SOLIDS</b>							Analyst: KS
Total Dissolved Solids	396	20.0		mg/L	1	6/21/2018 5:03:00 PM	38785

Refer to the QC Summary report and sample login checklist for flagged QC data and preservation information.

Qualifiers:	*	Value exceeds Maximum Contaminant Level.	B	Analyte detected in the associated Method Blank
	D	Sample Diluted Due to Matrix	E	Value above quantitation range
	H	Holding times for preparation or analysis exceeded	J	Analyte detected below quantitation limits
	ND	Not Detected at the Reporting Limit	P	Sample pH Not In Range
	PQL	Practical Quantitative Limit	RL	Reporting Detection Limit
	S	% Recovery outside of range due to dilution or matrix	W	Sample container temperature is out of limit as specified



# QC SUMMARY REPORT

Hall Environmental Analysis Laboratory, Inc.

EXHIBIT H

WO#: 1806979

05-Jul-18

Client: Permits West

Project: Seely Ek Queen H2O Wells

Sample ID	MB-38719	SampType:	MBLK	TestCode:	EPA Method 1664B					
Client ID:	PBW	Batch ID:	38719	RunNo:	52053					
Prep Date:	6/18/2018	Analysis Date:	6/18/2018	SeqNo:	1702801	Units:	mg/L			
Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
N-Hexane Extractable Material	ND	10.0								

Sample ID	LCS-38719	SampType:	LCS	TestCode:	EPA Method 1664B					
Client ID:	LCSW	Batch ID:	38719	RunNo:	52053					
Prep Date:	6/18/2018	Analysis Date:	6/18/2018	SeqNo:	1702802	Units:	mg/L			
Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
N-Hexane Extractable Material	33.4	10.0	40.00	0	83.5	78	114			

## Qualifiers:

* Value exceeds Maximum Contaminant Level.	B Analyte detected in the associated Method Blank
D Sample Diluted Due to Matrix	E Value above quantitation range
H Holding times for preparation or analysis exceeded	J Analyte detected below quantitation limits
ND Not Detected at the Reporting Limit	P Sample pH Not In Range
PQL Practical Quantitative Limit	RL Reporting Detection Limit
S % Recovery outside of range due to dilution or matrix	W Sample container temperature is out of limit as specified

# QC SUMMARY REPORT

Hall Environmental Analysis Laboratory, Inc.

EXHIBIT H

WO#: 1806979

05-Jul-18

Client: Permits West  
Project: Seely Ek Queen H2O Wells

Sample ID	MB	SampType:	MBLK	TestCode:	EPA Method 300.0: Anions					
Client ID:	PBW	Batch ID:	R52361	RunNo:	52361					
Prep Date:		Analysis Date:	6/28/2018	SeqNo:	1716012	Units:	mg/L			
Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Chloride	ND	0.50								

Sample ID	LCS-b	SampType:	LCS	TestCode:	EPA Method 300.0: Anions					
Client ID:	LCSW	Batch ID:	R52361	RunNo:	52361					
Prep Date:		Analysis Date:	6/28/2018	SeqNo:	1716021	Units:	mg/L			
Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Chloride	4.9	0.50	5.000	0	98.9	90	110			

Sample ID	1806979-001BMS	SampType:	MS	TestCode:	EPA Method 300.0: Anions					
Client ID:	Selly-EkQ-1	Batch ID:	R52361	RunNo:	52361					
Prep Date:		Analysis Date:	6/28/2018	SeqNo:	1716032	Units:	mg/L			
Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Chloride	110	5.0	50.00	64.29	96.0	85.9	109			

Sample ID	1806979-001BMSD	SampType:	MSD	TestCode:	EPA Method 300.0: Anions					
Client ID:	Selly-EkQ-1	Batch ID:	R52361	RunNo:	52361					
Prep Date:		Analysis Date:	6/28/2018	SeqNo:	1716033	Units:	mg/L			
Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Chloride	110	5.0	50.00	64.29	93.8	85.9	109	0.989	20	

## Qualifiers:

- |   |   |
|---|---|
| * Value exceeds Maximum Contaminant Level.              | B Analyte detected in the associated Method Blank           |
| D Sample Diluted Due to Matrix                          | E Value above quantitation range                            |
| H Holding times for preparation or analysis exceeded    | J Analyte detected below quantitation limits                |
| ND Not Detected at the Reporting Limit                  | P Sample pH Not In Range                                    |
| PQL Practical Quantitative Limit                        | RL Reporting Detection Limit                                |
| S % Recovery outside of range due to dilution or matrix | W Sample container temperature is out of limit as specified |

## QC SUMMARY REPORT

Hall Environmental Analysis Laboratory, Inc.

WO#: 1806979

05-Jul-18

Client: Permits West  
 Project: Seely Ek Queen H2O Wells

Sample ID	MB-38785	SampType:	MBLK	TestCode:	SM2540C MOD: Total Dissolved Solids					
Client ID:	PBW	Batch ID:	38785	RunNo:	52144					
Prep Date:	6/20/2018	Analysis Date:	6/21/2018	SeqNo:	1707681	Units:	mg/L			
Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Total Dissolved Solids	ND	20.0								

Sample ID	LCS-38785	SampType:	LCS	TestCode:	SM2540C MOD: Total Dissolved Solids					
Client ID:	LCSW	Batch ID:	38785	RunNo:	52144					
Prep Date:	6/20/2018	Analysis Date:	6/21/2018	SeqNo:	1707682	Units:	mg/L			
Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Total Dissolved Solids	1010	20.0	1000	0	101	80	120			

## Qualifiers:

* Value exceeds Maximum Contaminant Level.	B Analyte detected in the associated Method Blank
D Sample Diluted Due to Matrix	E Value above quantitation range
H Holding times for preparation or analysis exceeded	J Analyte detected below quantitation limits
ND Not Detected at the Reporting Limit	P Sample pH Not In Range
PQL Practical Quantitative Limit	RL Reporting Detection Limit
S % Recovery outside of range due to dilution or matrix	W Sample container temperature is out of limit as specified



Ogallala aquifer

0.7 mile

EKQU 111

EXHIBIT H

Google Earth

1000 ft

32.74495, -103.61505

Geologic Assessment

Seely Oil Company

E-K Queen #111 SWD

Section 13, Township 18 South, Range 33 East

Lea County, New Mexico

Cory Walk, M.S.

Geologist

Permits West, LLC

June 27, 2018

Cory Walk

B.S.

M.S.



## **General Information**

E-K Queen #111 SWD well will be located in the SE 1/4, section 13, T18S, R33E, about 20 miles southwest of Lovington, NM in the Permian Basin. Seely Oil Company has indicated one bed within the Queen formation as the proposed injection zone (4,360'-4,367' below ground surface). This report assesses any potential concerns relating to the connection between the injection zone and known underground potable water sources.

## **Groundwater Sources**

Three principal aquifers are used for potable groundwater in Lea County; these geologic units include the Triassic Santa Rosa formation, Tertiary Ogallala formation, and Quaternary alluvium. Nicholson and Clebsch (1961) state, "Potable ground water is not available below the Permian and Triassic unconformity but, because this boundary is not easily defined, the top of the Rustler anhydrite formation is regarded as the effective lower limit of 'potable' ground water." Around the E-K Queen #111 SWD well, a thick anhydrite unit interpreted to represent the Rustler formation lies at a depth of ~1650 feet bgs.

## **Faults and Fractures**

The Geologic Map of New Mexico (2003) shows the nearest fault to the SWD location is found 45 miles to the northwest (Figure 1). A large accumulation of northwest trending Basin and Range style normal faults lie ~80 miles from the SWD well. This fault zone is interpreted to be a southeastern extension of the Rio Grande Rift zone (Muehlberger et al., 1978) and is the only area in which deeply penetrating faults exist throughout the region.

A structure contour map of the Paleozoic Ellenburger formation shows the E-K Queen #111 SWD well is adjacent to many Precambrian basement faults (Figure 2; Modified from Ruppel et al., 2009). However, Montgomery (1997) shows that these faults remain deep below the surface and do not penetrate the Delaware Mountain group, which includes the Permian Queen formation (Figure 3).

## **Stratigraphy**

Well data in this region is recorded by the New Mexico Oil Conservation Division (OCD). Well logs from the E-K Queen #111 SWD well (API# 30-025-36368) show low permeability (limestone/dolomite/anhydrite) units both above and below the proposed injection zone (Figure 4). The injection zone is characterized by a very high porosity zone. Well data indicates ~2,700 ft of rock separating the top of the Queen Formation from the previously stated lower limit of potable water at the top of the Rustler anhydrite formation. Within the separating ~2,700 feet of strata include several horizons of impermeable formations including the Rustler anhydrite and Salado halite formations.

## **Concluding Statement**

Geologic data evaluated around the E-K Queen #111 SWD well show no potential structural or stratigraphic connection between the Queen Formation injection zone and any subsurface potable water sources.

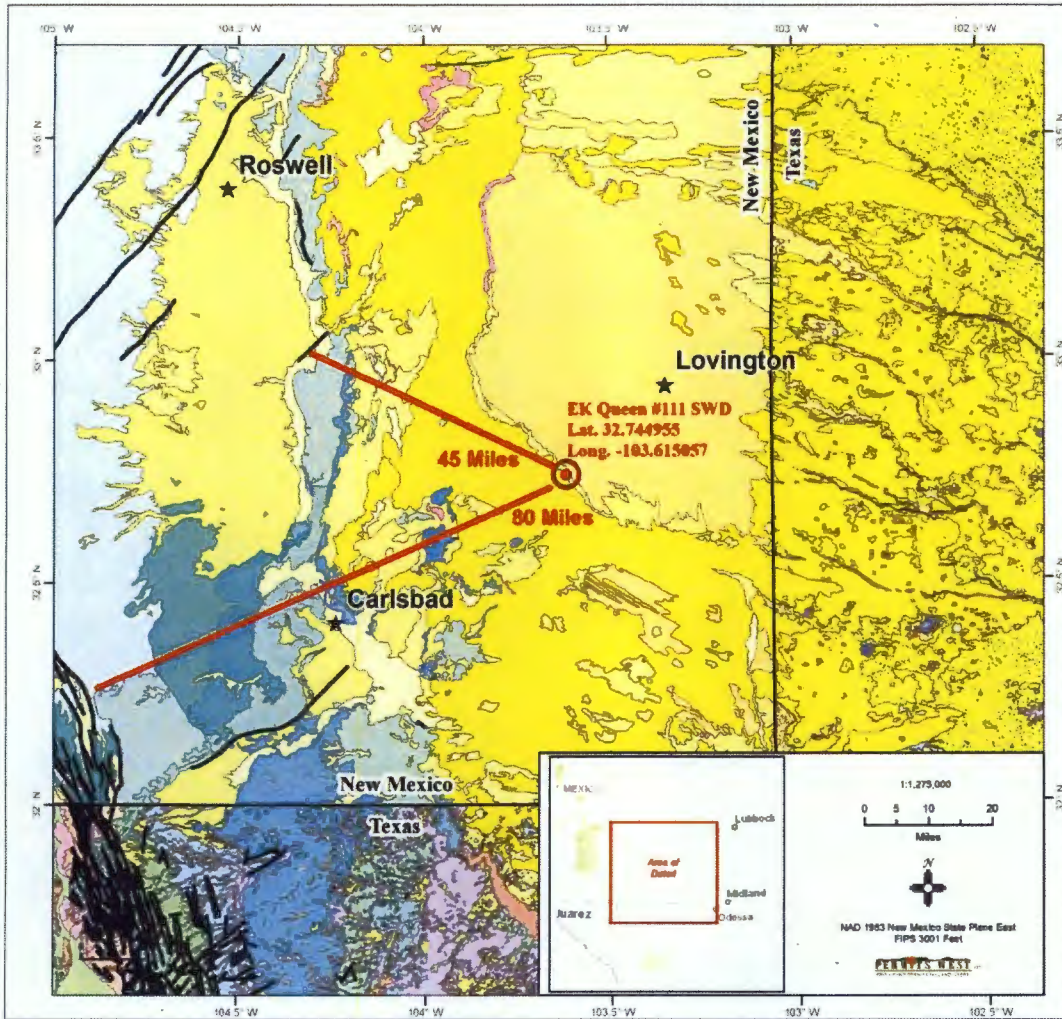


Figure 1. Geologic map of the northwestern Permian Basin. Thick black lines represent locations of fault traces and show that the nearest faults to the proposed E-K Queen #111 SWD well lie >45 miles away.

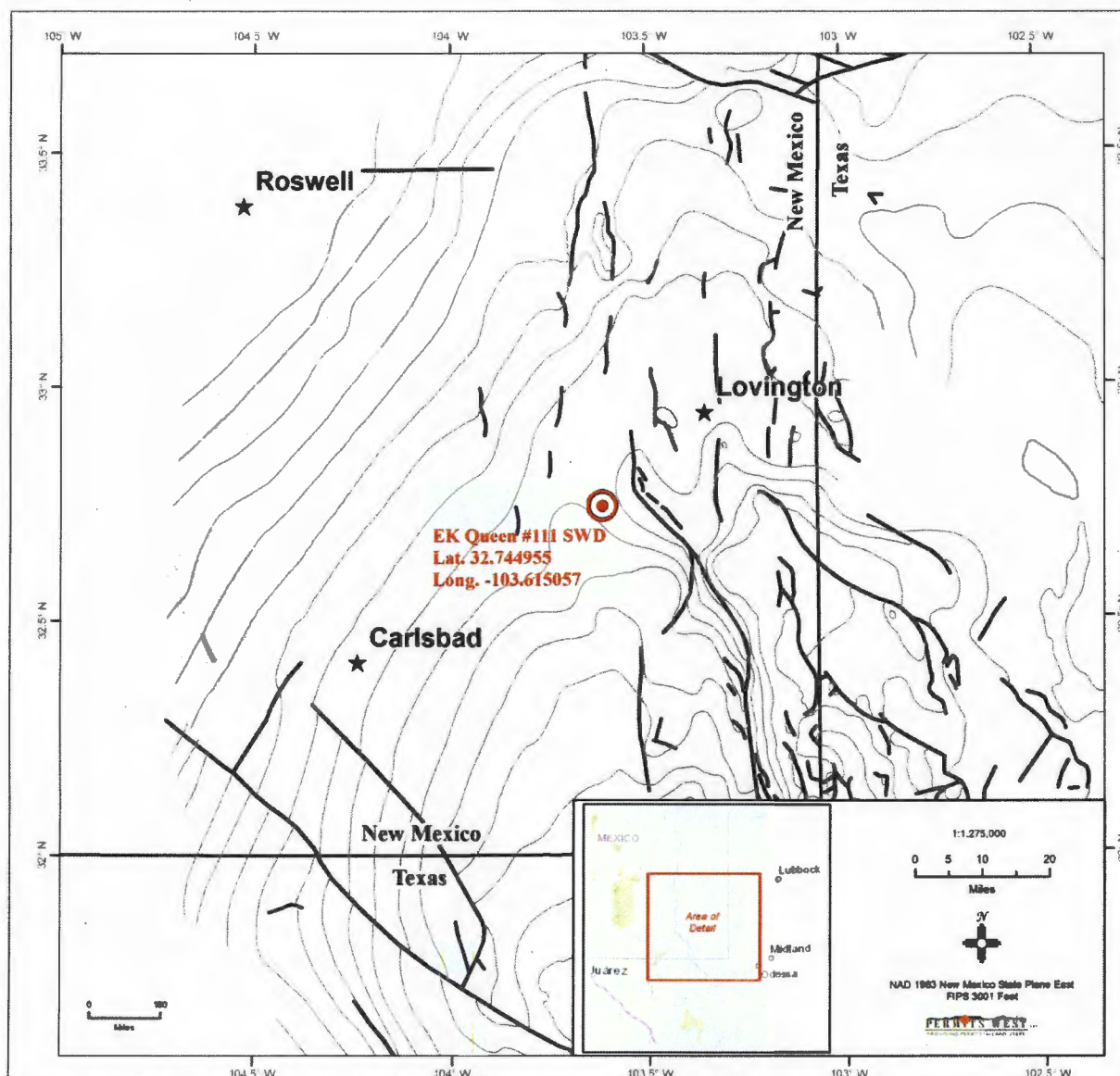


Figure 2 Structural contour map of the Paleozoic Ellenburger formation. Thick black lines represent the locations of deep Precambrian basement faults. Precambrian faults are close to the proposed SWD well location, however, these faults are too deep to allow the injected fluids to travel toward the surface.



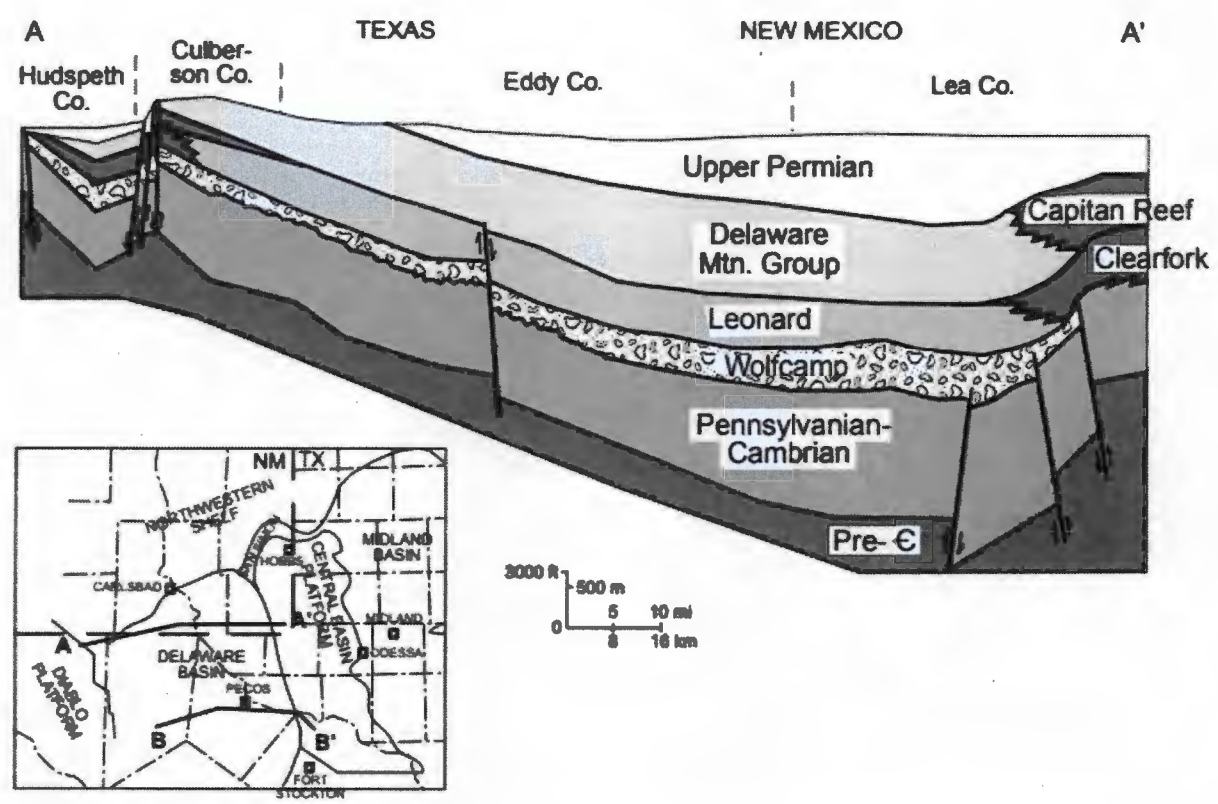


Figure 3. Cross section of the Permian Basin from Montgomery (1997). Notice the basement faults only penetrating through the Leonardian and deeper formations and not through the proposed injection zone within the Delaware Mtn. Group.

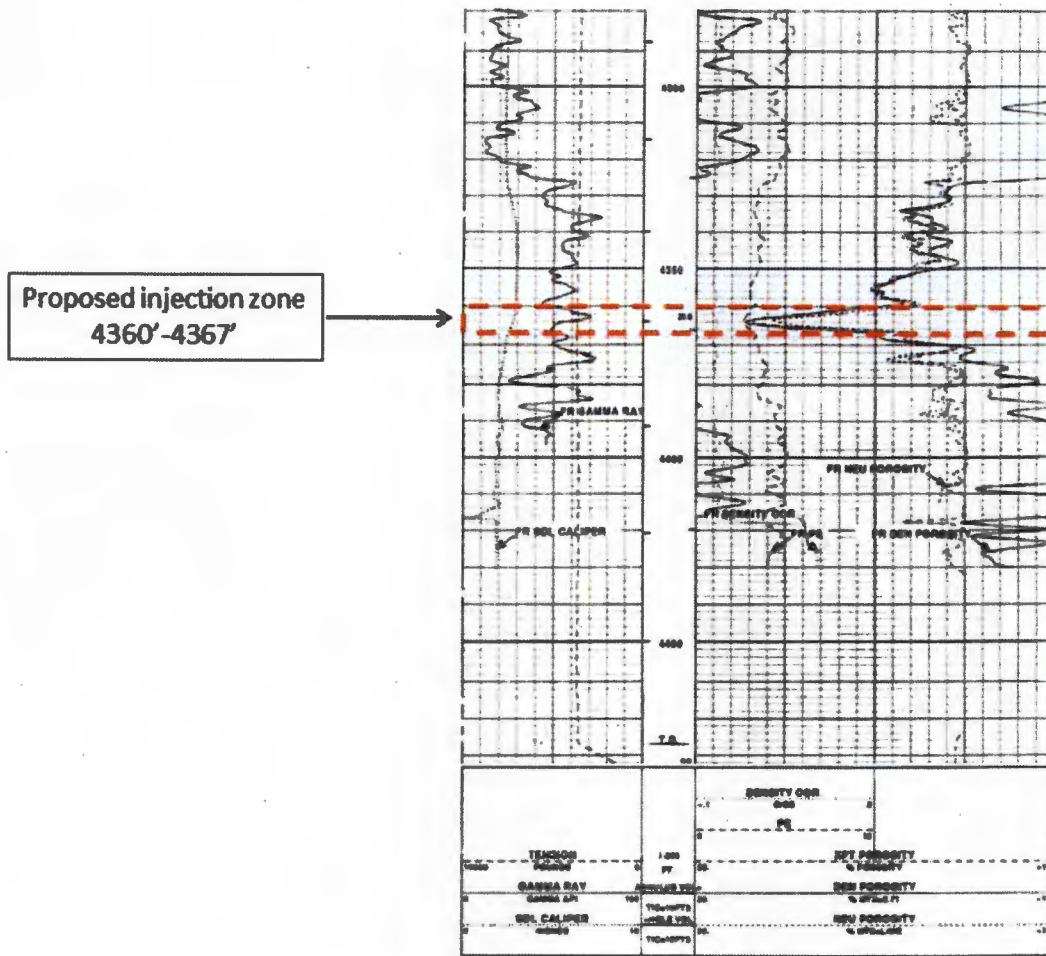


Figure 4. Well log taken from the E-K Queen #111 SWD well illustrating the proposed injection zone in a dashed red line. The injection zone is characterized by an extremely high porosity bed. The injection zone is confined on either side by low porosity beds of limestone, dolomite, anhydrite, etc.

**References Cited**

Geologic Map of New Mexico, New Mexico Bureau of Geology and Mineral Resources, 2003, Scale 1:500,000.

Montgomery, S. L., 1997, Permian Bone Spring Formation: Sandstone play in the Delaware basin: Part I. Slope: AAPG Bulletin, v. 81, p. 1239–1258.

Muehlberger, W.R., Belcher, R.C., and Goetz, L.K., 1978, Quaternary faulting in Trans-Pecos Texas: Geology, v. 6, p. 337–340.

Nicholson, A., Jr., and Clebsch, A., Jr., 1961, Geology and ground-water conditions in southern Lea County, New Mexico: New Mexico Bureau of Mines and Mineral Resources, Ground-Water Report 6, 123 pp., 2 plates.

Ruppel, S.C., 2009, Integrated synthesis of the Permian basin: data and models for recovering existing and undiscovered oil resources from the largest oil-bearing basin: U.S. Oil & Natural Gas Technology, Bureau Economic Geology, The University of Texas at Austin, p. 1-959.

# Affidavit of Publication

EXHIBIT J

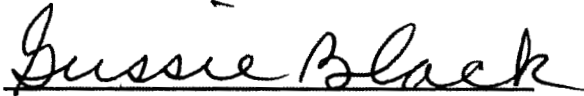
STATE OF NEW MEXICO  
COUNTY OF LEA

I, Daniel Russell, Publisher of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, solemnly swear that the clipping attached hereto was published in the regular and entire issue of said newspaper, and not a supplement thereof for a period of 1 issue(s).

Beginning with the issue dated  
August 01, 2018  
and ending with the issue dated  
August 01, 2018.

  
Publisher

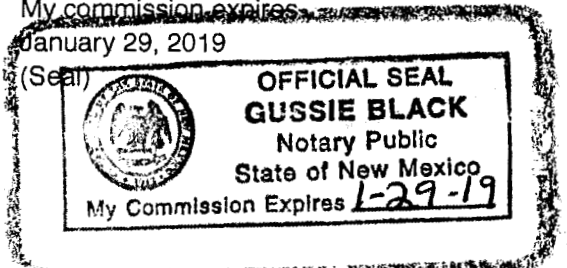
Sworn and subscribed to before me this  
1st day of August 2018.

  
Business Manager

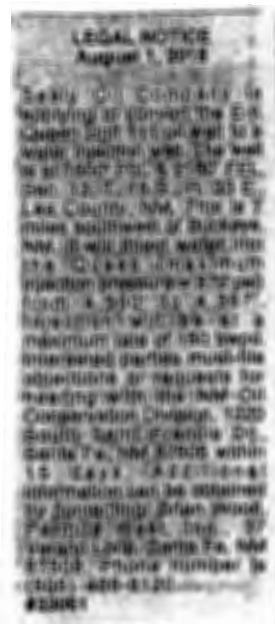
My commission expires

January 29, 2019

(Seal)



This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937 and payment of fees for said



02108485

00215889

BRIAN WOOD  
PERMITS WEST  
37 VERANO LOOP  
SANTA FE, NM 87508

August 20, 2018

BLM  
620 E. Greene  
Carlsbad NM 88220

TYPICAL LETTER

Seely Oil Co. is applying (see attached application) to convert its E-K Queen Unit 111 oil well to a water injection well. As required by NM Oil Conservation Division (NMOCD) Rules, I am notifying you of the following proposed water injection well. No action is needed unless you have questions or objections.

Well Name: E-K Queen Unit 111 (BLM lease) TD = 4487'  
Proposed Injection Zone: Queen from 4360' to 4367'  
Where: 1650' FSL & 2160' FEL Sec. 13, T. 18 S., R. 33 E., Lea County, NM  
Approximate Location: 7 air miles southwest of Buckeye, NM  
Applicant Name: Seely Oil Co. (817) 332-1377  
Applicant's Address: 815 West 10<sup>th</sup> St., Ft. Worth, TX 76102

Submittal Information: Application for a water injection well will be filed with the NMOCD. If you have an objection, or wish to request a hearing, then it must be filed with the NMOCD within 15 days of receipt of this letter. The New Mexico Oil Conservation Division address is 1220 South St. Francis Dr. Santa Fe, NM 87505. Their phone number is (505) 476-3440.

Please call me if you have any questions.

Sincerely,



Brian Wood

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#3000  
MIDLAND TX 79705  
Seely EK Queen 111

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UNIT #9  
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MIDLAND TX 79701  
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BARTLESVILLE OK 74605  
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DAHLIN, MERLYN W  
3220 N FWY  
FORT WORTH TX 76102  
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FORT WORTH, TX 76111  
Seely EK Queen 111

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330 W SHERIDAN AVE  
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FORT WORTH, TX 76102  
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4401 N MESA #201  
EL PASO, TX 79902  
Seely EK Queen 111

PS Form 3800, April 2015 PSN 750-02-000-9047 See Reverse for Instructions

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Postmark Here  
AUG 21 2018

JC PACE OIL & GAS LLC  
420 THROCKMORTON ST  
STE 210  
FORT WORTH, TX 76102  
Seely EK Queen 111

PS Form 3800, April 2015 PSN 750-02-000-9047 See Reverse for Instructions

**CERTIFIED MAIL® RECEIPT**  
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Postmark Here  
AUG 21 2018

JC THOMPSON &  
J C THOMPSON JR  
325 N ST PAUL ST STE 4300  
DALLAS, TX 75201  
Seely EK Queen 111

PS Form 3800, April 2015 PSN 750-02-000-9047 See Reverse for Instructions

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Postmark Here  
AUG 21 2018

JOHN P OIL COMPANY  
1320 LAKE STREET  
FORT WORTH, TX 76102  
Seely EK Queen 111

PS Form 3800, April 2015 PSN 750-02-000-9047 See Reverse for Instructions

EXHIBIT K

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☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage

Total Postage and Fees \$

Sent To  
KAHLIN, MERLYN W  
3220 NORTH FREEWAY  
FORT WORTH TX 76102  
Seely EK Queen 111

Send and get back your PO Receipt

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9007 See Reverse for Instructions

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Domestic Mail Only

Extra Services & Fees (check one or more):  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage

Total Postage and Fees \$

Sent To  
MOBIL PRODUCING TX & NM INC  
C/O EXXON MOBIL  
5958 LAS COLINAS BLVD  
IRVING TX 75039  
Seely EK Queen 111

Send and get back your PO Receipt

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9007 See Reverse for Instructions

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Extra Services & Fees (check one or more):  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage

Total Postage and Fees \$

Sent To  
PXP GULF COAST INC  
500 DALLAS #700  
HOUSTON TX 77002  
Seely EK Queen 111

Send and get back your PO Receipt

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9007 See Reverse for Instructions

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Extra Services & Fees (check one or more):  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage

Total Postage and Fees \$

Sent To  
MAGNUM HUNTER  
PRODUCTION INC  
202 S CHEYENNE AVE STE 1000  
TULSA OK 74103  
Seely EK Queen 111

Send and get back your PO Receipt

City, State, ZIP+4®

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☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage

Total Postage and Fees \$

Sent To  
MOBIL PRODUCING TX & NM INC  
C/O XTO ENERGY  
810 HOUSTON ST  
FORT WORTH TX 76102  
Seely EK Queen 111

Send and get back your PO Receipt

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9007 See Reverse for Instructions

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☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage

Total Postage and Fees \$

Sent To  
PVB OIL CO.  
1320 LAKE STREET  
FORT WORTH TX 76102  
Seely EK Queen 111

Send and get back your PO Receipt

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9007 See Reverse for Instructions

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Extra Services & Fees (check one or more):  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage

Total Postage and Fees \$

Sent To  
MANIX ENERGY  
PO BOX 2818  
MIDLAND TX 79702  
Seely EK Queen 111

Send and get back your PO Receipt

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9007 See Reverse for Instructions

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Extra Services & Fees (check one or more):  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage

Total Postage and Fees \$

Sent To  
NMSLO  
PO BOX 1148  
SANTA FE NM 87504  
Seely EK Queen 111

Send and get back your PO Receipt

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9007 See Reverse for Instructions

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Domestic Mail Only

Extra Services & Fees (check one or more):  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage

Total Postage and Fees \$

Sent To  
RIDGE RUNNER RESOURCES  
601 N MARIENFELD ST  
STE 500  
MIDLAND TX 79701  
Seely EK Queen 111

Send and get back your PO Receipt

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9007 See Reverse for Instructions

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Domestic Mail Only

Extra Services & Fees (check one or more):  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage

Total Postage and Fees \$

Sent To  
MARBOB ENERGY CORP  
C/O COG  
600 W ILLINOIS AVE  
MIDLAND TX 79701  
Seely EK Queen 111

Send and get back your PO Receipt

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9007 See Reverse for Instructions

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☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage

Total Postage and Fees \$

Sent To  
P.D. BOSWELL TRUST  
1320 LAKE STREET  
FORT WORTH TX 76102  
Seely EK Queen 111

Send and get back your PO Receipt

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9007 See Reverse for Instructions

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Domestic Mail Only

Extra Services & Fees (check one or more):  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage

Total Postage and Fees \$

Sent To  
SANTA FE EXPL CO  
BOX 1136  
ROSOWELL NM 88202  
Seely EK Queen 111

Send and get back your PO Receipt

City, State, ZIP+4®

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☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage

Total Postage and Fees \$

Sent To  
MERLYN H. WRIGHT FAMILY TRUST  
6300 RIDGLEA PL STE 511  
FORT WORTH TX 76116  
Seely EK Queen 111

Send and get back your PO Receipt

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9007 See Reverse for Instructions

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☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage

Total Postage and Fees \$

Sent To  
PETROHAWK ENERGY CORP  
c/o BHP  
4201 SOUTHWEST FREEWAY  
HOUSTON TX 77027  
Seely EK Queen 111

Send and get back your PO Receipt

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9007 See Reverse for Instructions

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Extra Services & Fees (check one or more):  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage

Total Postage and Fees \$

Sent To  
SANTA FE SNYDER CORP  
840 GESSNER #1400  
HOUSTON TX 77024  
Seely EK Queen 111

Send and get back your PO Receipt

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9007 See Reverse for Instructions



EXHIBIT K

701A 0680 0001 6411 8257

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$

Total Postage and Fees \$

Sent To **SEELY, JNA B & C W**  
815 W 10TH ST  
FORT WORTH TX 76102  
Seely EK Queen 111

Stamp and Affix No. 1 of 10 (PSN No.)

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7500-02-000-9047 See Reverse for Instructions

701A 0680 0001 6411 8274

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT**  
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For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$

Total Postage and Fees \$

Sent To **SSV&H ASSOCIATES**  
815 W 10TH ST  
FORT WORTH TX 76102  
Seely EK Queen 111

Stamp and Affix No. 1 of 10 (PSN No.)

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7500-02-000-9047 See Reverse for Instructions

701A 0680 0001 6411 8281

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Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$

Total Postage and Fees \$

Sent To **TRIGG OIL & GAS LP**  
PO BOX 520  
ROSWELL NM 88202  
Seely EK Queen 111

Stamp and Affix No. 1 of 10 (PSN No.)

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7500-02-000-9047 See Reverse for Instructions

701A 0680 0001 6411 8298

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For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$

Total Postage and Fees \$

Sent To **WES-TEX DRILLING CO LP**  
PO BOX 3739  
ARILENE TX 79604  
Seely EK Queen 111

Stamp and Affix No. 1 of 10 (PSN No.)

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7500-02-000-9047 See Reverse for Instructions

701A 0680 0001 6411 8304

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$

Total Postage and Fees \$

Sent To **BPZ-DELAWARE LLC**  
2000 POST OAK BLVD STE 100  
HOUSTON TX 77066  
Seely EK Queen 111

Stamp and Affix No. 1 of 10 (PSN No.)

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7500-02-000-9047 See Reverse for Instructions



EXHIBIT K

Complete items 1, 2, and 3.  
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.

Article Addressed to:  
CONOCO PHILLIPS CO  
PO BOX 7500  
BARTLESVILLE OK 74005

Seely EK Queen Unit 111

9590 9402 3720 7335 0563 26

Article Number (Transfer from service label)  
7018 0680 0001 6411 7826

Form 3811, July 2015 PSN 7530-02-000-9053

A. Signature  
X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
C. Date of Delivery  
8-24-13

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Complete items 1, 2, and 3.  
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.

1. Article Addressed to:  
HENDERSON, DAVID & DAWN  
815 W 10TH ST  
FORT WORTH TX 76102

Seely EK Queen Unit 111

9590 9402 3720 7335 0562 72

2. Article Number (Transfer from service label)  
7018 0680 0001 6411 7956

PS Form 3811, July 2015 PSN 7530-02-000-9053

A. Signature  
X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
C. Date of Delivery  
8/24/13

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.  
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.

Article Addressed to:  
DEVON ENERGY PROD CO LP  
330 W SHERIDAN AVE  
OKLAHOMA CITY OK 73102

Seely EK Queen Unit 111

9590 9402 3720 7335 0567 77

Article Number (Transfer from service label)  
7018 0680 0001 6411 7901

Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
C. Date of Delivery  
8/30/13

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.  
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.

1. Article Addressed to:  
HILL HOUSTON  
500 THROCKMORTON  
FORT WORTH TX 76102

Seely EK Queen Unit 111

9590 9402 3720 7335 0562 89

2. Article Number (Transfer from service label)  
7018 0680 0001 6411 7963

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
C. Date of Delivery  
8/24/13

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.  
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.

Article Addressed to:  
EXPRESS AIR DRILLING  
3833 OAK LAWN AVE  
DALLAS TX 75219

Seely EK Queen Unit 111

9590 9402 3720 7335 0567 91

Article Number (Transfer from service label)  
7018 0680 0001 6411 7925

Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
C. Date of Delivery  
9/24/13

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.  
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.

1. Article Addressed to:  
HILL HOUSTON TRUST  
500 W 7TH ST  
STE 1802 UNIT 16  
FORT WORTH TX 76102

Seely EK Queen Unit 111

9590 9402 3720 7335 0565 62

2. Article Number (Transfer from service label)  
7018 0680 0001 6411 7970

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
C. Date of Delivery  
8/14/13

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.  
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.

Article Addressed to:  
HAVEL KATHLEEN A  
7607 CHALKSTONE  
DALLAS TX 75219

Seely EK Queen Unit 111

9590 9402 3720 7335 0569 51

Article Number (Transfer from service label)  
7018 0680 0001 6411 7932

Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
C. Date of Delivery  
8/24/13

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.  
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.

1. Article Addressed to:  
HUNT CIMARRON LP  
PO BOX 1592  
ROSWELL NM 88202

Seely EK Queen Unit 111

9590 9402 3720 7335 0565 79

2. Article Number (Transfer from service label)  
7018 0680 0001 6411 7987

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
C. Date of Delivery  
8/16/13

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.  
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.

Article Addressed to:  
HAVEL MICHAEL  
7607 CHALKSTONE  
DALLAS TX 75219

Seely EK Queen Unit 111

9590 9402 3720 7335 0562 65

Article Number (Transfer from service label)  
7018 0680 0001 6411 7934

Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
C. Date of Delivery  
8/23/13

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.  
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.

1. Article Addressed to:  
HUNT, WOODY L  
4401 N MESA #201  
EL PASO TX 79902

Seely EK Queen Unit 111

9590 9402 3720 7335 0565 86

2. Article Number (Transfer from service label)  
7018 0680 0001 6411 7934

Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
C. Date of Delivery  
8/23/13

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

EXHIBIT K

Complete items 1, 2, and 3.  
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.

Article Addressed to:  
MAGNUM HUNTER PRODUCTION INC  
202 S CHEYENNE AVE STE 1000  
TULSA OK 74103

Seely EK Queen Unit 111

9590 9402 3720 7335 0566 47

Article Number (Transfer from service label)  
7018 0680 0001 6411 8045

Form 3811, July 2015 PSN 7530-02-000-9053

A. Signature  
Justin Wallace  
B. Received by (Printed Name)  
JUSTIN WALLACE  
C. Date of Delivery  
8-2-15  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Insured Mail  
☐ Registered Mail®  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Complete items 1, 2, and 3.  
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.

Article Addressed to:  
JOHN P OIL COMPANY  
1320 LAKE STREET  
FORT WORTH TX 76102

Seely EK Queen Unit 111

9590 9402 3720 7335 0566 16

Article Number (Transfer from service label)  
7018 0680 0001 6411 8021

Form 3811, July 2015 PSN 7530-02-000-9063

A. Signature  
Margo Hooper  
B. Received by (Printed Name)  
MARGO HOOPER  
C. Date of Delivery  
AUG 2 4 2015  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail®  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION  
Complete items 1, 2, and 3.  
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.

Article Addressed to:  
MANIX ENERGY  
PO BOX 2818  
MIDLAND TX 79702

Seely EK Queen Unit 111

9590 9402 3720 7335 0566 54

Article Number (Transfer from service label)  
7018 0680 0001 6411 8052

Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY  
A. Signature  
B. Received by (Printed Name)  
C. Date of Delivery  
8-2-15  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail®  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION  
Complete items 1, 2, and 3.  
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.

Article Addressed to:  
JC PACE OIL & GAS LLC  
420 THROCKMORTON ST  
STE 710  
FORT WORTH TX 76102

Seely EK Queen Unit 111

9590 9402 3720 7335 0565 93

Article Number (Transfer from service label)  
7018 0680 0001 6411 8007

Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY  
A. Signature  
B. Received by (Printed Name)  
C. Date of Delivery  
8-2-15  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail®  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION  
Complete items 1, 2, and 3.  
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.

Article Addressed to:  
MARBOB ENERGY CORP  
C/O COG  
600 W ILLINOIS AVE  
MIDLAND TX 79701

Seely EK Queen Unit 111

9590 9402 3720 7335 0564 63

Article Number (Transfer from service label)  
7018 0680 0001 6411 8069

Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY  
A. Signature  
B. Received by (Printed Name)  
C. Date of Delivery  
8-2-15  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail®  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION  
Complete items 1, 2, and 3.  
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.

Article Addressed to:  
PVB OIL CO  
1320 LAKE STREET  
FORT WORTH TX 76102

Seely EK Queen Unit 111

9590 9402 3720 7335 0565 48

Article Number (Transfer from service label)  
7018 0680 0001 6411 8229

Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY  
A. Signature  
B. Received by (Printed Name)  
C. Date of Delivery  
AUG 2 4 2015  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail®  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION  
Complete items 1, 2, and 3.  
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.

Article Addressed to:  
MOBIL PRODUCING TX & NM INC  
C/O EXXON MOBIL  
5959 LAS COLINAS BLVD  
IRVING TX 75039

Seely EK Queen Unit 111

9590 9402 3720 7335 0564 87

Article Number (Transfer from service label)  
7018 0680 0001 6411 8083

Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY  
A. Signature  
B. Received by (Printed Name)  
C. Date of Delivery  
AUG 2 4 2015  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail®  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION  
Complete items 1, 2, and 3.  
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.

Article Addressed to:  
RIDGE RUNNER RESOURCES  
601 N MARIONFIELD ST  
STE 500  
MIDLAND TX 79701

Seely EK Queen Unit 111

9590 9402 3720 7335 0565 55

Article Number (Transfer from service label)  
7018 0680 0001 6411 8236

Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY  
A. Signature  
B. Received by (Printed Name)  
C. Date of Delivery  
8-2-15  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail®  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION  
Complete items 1, 2, and 3.  
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.

Article Addressed to:  
MOBIL PRODUCING TX & NM INC  
C/O XTO ENERGY  
810 HOUSTON ST  
FORT WORTH TX 76102

Seely EK Queen Unit 111

9590 9402 3720 7335 0564 94

Article Number (Transfer from service label)  
7018 0680 0001 6411 8125

Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY  
A. Signature  
B. Received by (Printed Name)  
C. Date of Delivery  
AUG 2 4 2015  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail®  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION  
Complete items 1, 2, and 3.  
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.

Article Addressed to:  
SANTA FE SNYDER CORP  
840 GESSNER #1400  
HOUSTON TX 77024

Seely EK Queen Unit 111

9590 9402 3720 7335 0564 18

Article Number (Transfer from service label)  
7018 0680 0001 6411 8250

Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY  
A. Signature  
B. Received by (Printed Name)  
C. Date of Delivery  
8-2-15  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail®  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Complete Items 1, 2, and 3.  
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.

Article Addressed to:  
SEELY, INA B & C W  
815 W 10TH ST  
FORT WORTH TX 76102  
Seely EK Queen Unit 111

Barcode: 9590 9402 3720 7335 0564 25

Article Number (Transfer from service label)  
7018 0680 0001 6411 8267

Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Priority Mail Express®  
Registered Mail™  
Registered Mail Restricted Delivery  
Return Receipt for Merchandise  
Signature Confirmation™  
Signature Confirmation Restricted Delivery

Complete Items 1, 2, and 3.  
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.

Article Addressed to:  
ZPZ DELAWARE I LLC  
2000 POST OAK BLVD STE 100  
HOUSTON TX 77056  
Seely EK Queen Unit 111

Barcode: 9590 9402 3720 7335 0563 95

Article Number (Transfer from service label)  
7018 0680 0001 6411 8304

Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Priority Mail Express®  
Registered Mail™  
Registered Mail Restricted Delivery  
Return Receipt for Merchandise  
Signature Confirmation™  
Signature Confirmation Restricted Delivery

EXHIBIT K

SENDER: COMPLETE THIS SECTION

Complete Items 1, 2, and 3.  
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.

Article Addressed to:  
SSV&H ASSOCIATES  
815 W 10TH ST  
FORT WORTH TX 76102  
Seely EK Queen Unit 111

Barcode: 9590 9402 3720 7335 0564 32

Article Number (Transfer from service label)  
7018 0680 0001 6411 8274

Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X John Ross ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
C. Date of Delivery  
8/27/18

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Priority Mail Express®  
Registered Mail™  
Registered Mail Restricted Delivery  
Return Receipt for Merchandise  
Signature Confirmation™  
Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

Complete Items 1, 2, and 3.  
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.

Article Addressed to:  
J C THOMPSON & J C THOMPSON JR  
325 N ST PAUL ST STE 4300  
DALLAS TX 75201  
Seely EK Queen Unit 111

Barcode: 9590 9402 3720 7335 0566 09

Article Number (Transfer from service label)  
7018 0680 0001 6411 8014

Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X Steve Cantrell ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
C. Date of Delivery  
Steve Cantrell

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Priority Mail Express®  
Registered Mail™  
Registered Mail Restricted Delivery  
Return Receipt for Merchandise  
Signature Confirmation™  
Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

Complete Items 1, 2, and 3.  
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.

Article Addressed to:  
TRIGG OIL & GAS LP  
PO BOX 520  
ROSWELL NM 89202  
Seely EK Queen Unit 111

Barcode: 9590 9402 3720 7335 0564 49

Article Number (Transfer from service label)  
7018 0680 0001 6411 8281

Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X John Ross ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
C. Date of Delivery  
John Ross

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Priority Mail Express®  
Registered Mail™  
Registered Mail Restricted Delivery  
Return Receipt for Merchandise  
Signature Confirmation™  
Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

Complete Items 1, 2, and 3.  
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.

Article Addressed to:  
WES-TEX DRILLING CO LP  
PO BOX 3739  
ABILENE TX 79604  
Seely EK Queen Unit 111

Barcode: 9590 9402 3720 7335 0564 56

Article Number (Transfer from service label)  
7018 0680 0001 6411 8293

Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X P. Robbins ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
C. Date of Delivery  
Patty Robbins 8-27-18

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Priority Mail Express®  
Registered Mail™  
Registered Mail Restricted Delivery  
Return Receipt for Merchandise  
Signature Confirmation™  
Signature Confirmation Restricted Delivery

**McMillan, Michael, EMNRD**

---

**From:** McMillan, Michael, EMNRD  
**Sent:** Monday, September 24, 2018 8:31 AM  
**To:** 'Brian Wood'  
**Cc:** Sanchez, Daniel J., EMNRD; Goetze, Phillip, EMNRD  
**Subject:** Seely Oil Company E-K Queen State Well No. 111 WFX Administrative Application

Brian:  
The Seely Oil Company E-K Queen State Well No. 111 WFX Administrative Application has been suspended, because Seely Oil company is out of 5.9 compliance.

The Seely Oil Company Lea XA State Well No. 4 API 30-025-28790 requires additional bonding.

I have included Daniel Sanchez in this e-mail, for a contact to get the issue resolved.

Once I receive an e-mail from Daniel Sanchez confirming that additional bonding has been received and Seely is in 5.9 compliance, then the application can proceed.

Mike

Michael McMillan  
1220 South St. Francis  
Santa Fe, New Mexico  
505-476-3448  
Michael.mcmillan@state.nm.us



# FORM C-108 Technical Review Summary [Prepared by reviewer and included with application; V16.2]

DATE RECORD: First Rec: 9/06/2016 Admin Complete: \_\_\_\_\_ or Suspended: \_\_\_\_\_ Add. Request/Reply: \_\_\_\_\_

ORDER TYPE: WFX PMX / SWD Number: 988 Order Date: 3/15/19 Legacy Permits/Orders: 2-2514-1 ✓

Well No. 111 Well Name(s): E-K 124ccn 411.1

API: 30-0 25-3634 Spud Date: 9/09/2003 New or Old (EPA): N (UIC Class II Primacy 03/07/1982)

Footages 1650 ECL 216 UCEL Lot \_\_\_\_\_ or Unit 5 Sec 13 Tsp 18S Rge 33E County LC

General Location: 22 miles S SW Hobbs Pool: E-K 124ccn 411.1 Pool No.: 19950

BLM 100K Map: Hobbs Operator: SEELY OIL CO OGRID: 20497 Contact: Wade Agent

COMPLIANCE RULE 5.9: Total Wells: 81 Inactive: 1 Fincl Assur: OK Compl. Order? No IS 5.9 OK? Yes Date: 3/15/19

WELL FILE REVIEWED ☐ Current Status: Active

WELL DIAGRAMS: NEW: Proposed ☐ or RE-ENTER: Before Conv. ☒ After Conv. ☐ Logs in Imaging: Y

Planned Rehab Work to Well: \_\_\_\_\_

Well Construction Details		Sizes (in) Borehole / Pipe	Setting Depths (ft)	Cement Sx or Cf	Cement Top and Determination Method
Planned ___ or Existing <input checked="" type="checkbox"/> Surface		<u>11" / 4 5/8"</u>	<u>1770</u>	<u>480</u>	<u>Surface / Visual</u>
Planned ___ or Existing <input checked="" type="checkbox"/> Interm/Prod		<u>7 1/8" / 5 1/2"</u>	<u>4476</u>	<u>700</u>	<u>1650 PICAL</u>
Planned ___ or Existing ___ Interm/Prod					
Planned ___ or Existing ___ Prod/Liner					<u>Very</u>
Planned ___ or Existing ___ Liner					<u>Conservative</u>
Planned ___ or Existing <input checked="" type="checkbox"/> OH / PERP		<u>4360 / 4367</u>			<u>(1690) E Permitting</u>

Injection Lithostratigraphic Units:	Depths (ft)	Injection or Confining Units	Tops
Adjacent Unit: Litho. Struc. Por.		<u>72</u>	<u>3630</u>
Confining Unit: Litho. Struc. Por.		<u>Queen</u>	<u>4320</u>
Proposed Inj Interval TOP:			
Proposed Inj Interval BOTTOM:			
Confining Unit: Litho. Struc. Por.			
Adjacent Unit: Litho. Struc. Por.			

Completion/Operation Details:	
Drilled TD <u>4477</u>	PBTD <u>4405</u>
NEW TD _____	NEW PBTD _____
NEW Open Hole <input type="radio"/> or NEW Perfs <input checked="" type="radio"/>	
Tubing Size <u>2 3/8</u> in.	Inter Coated? <u>Y</u>
Proposed Packer Depth <u>4300</u> ft	
Min. Packer Depth <u>4260</u> (100-ft limit)	
Proposed Max. Surface Press. <u>800</u> psi	
Admin. Inj. Press. <u>872</u> (0.2 psi per ft)	

**AOR: Hydrologic and Geologic Information**

POTASH: R-111-P \_\_\_\_\_ Noticed? \_\_\_\_\_ BLM Sec Ord ☐ WIPP ☐ Noticed? \_\_\_\_\_ Salt/Salado T: 1845 B2964 NW: Cliff House fm

FRESH WATER: Aquifer Quaternary Max Depth 220 HYDRO AFFIRM STATEMENT By Qualified Person ☒

NMOSE Basin: LC CAPITAN REEF: thru \_\_\_\_\_ adj \_\_\_\_\_ NA ☒ No. GW Wells in 1-Mile Radius? 10 FW Analysis? Y

Disposal Fluid: Formation Source(s) Produced H<sub>2</sub>O Analysis? \_\_\_\_\_ On Lease ☒ Operator Only ☐ or Commercial ☐

Disposal Interval: Inject Rate (Avg/Max BWPD): 100/150 Protectable Waters? \_\_\_\_\_ Source: \_\_\_\_\_ System: Closed or Open

HC Potential: Producing Interval? \_\_\_\_\_ Formerly Producing? \_\_\_\_\_ Method: Logs/DST/P&A/Other \_\_\_\_\_ 2-Mi Radius Pool Map ☐

AOR Wells: 1/2-M Radius Map and Well List? \_\_\_\_\_ No. Penetrating Wells: 15 [AOR Horizontals: \_\_\_\_\_ AOR SWDs: \_\_\_\_\_]

Penetrating Wells: No. Active Wells \_\_\_\_\_ Num Repairs? \_\_\_\_\_ on which well(s)? \_\_\_\_\_ Diagrams? \_\_\_\_\_

Penetrating Wells: No. P&A Wells 810 Num Repairs? \_\_\_\_\_ on which well(s)? \_\_\_\_\_ Diagrams? Y

NOTICE: Newspaper Date 8-21-2018 Mineral Owner BLM Surface Owner BLM N. Date 8-21

RULE 26.7(A): Identified Tracts? \_\_\_\_\_ Affected Persons: COC, Devon, Apache N. Date 8-21-2018

Order Conditions: Issues: MA

Additional COAs: \_\_\_\_\_