

Initial Application Part I

Received: 01/28/2019

This application is placed in file for record. It MAY or MAY NOT have been reviewed to be determined Administratively Complete

SWD 1893

Revised March 23, 2017

RECEIVED: 1/24/2019	REVIEWER:	TYPE: SWD	APP NO: DMAm 19028 59117
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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

Applicant: 3Bear Field Services, LLC _____ **OGRID Number:** 372603 _____
Well Name: Smith Ranch SWD #1 _____ **API:** 30-025-45390 _____
Pool: SWD; Silurian-Devonian _____ **Pool Code:** 97869 _____

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

- 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	
<input type="checkbox"/>	Notice Complete
<input type="checkbox"/>	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.

Ramona Hovey – Agent of 3Bear Field Service

Print or Type Name

Ramona Hovey

Signature

January 24, 2019

Date

(512) 600-1777

Phone Number

ramona@lonquist.com

e-mail Address

January 24, 2019

New Mexico Energy, Minerals, and Natural Resources Department
Oil Conservation Division District IV
1220 South St. Francis Drive
Santa Fe, New Mexico 87505
(505) 476-3440

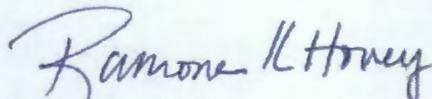
RE: SMITH RANCH SWD NO. 1 AUTHORIZATION TO INJECT

To Whom It May Concern:

Attached for your review is Form C-108, Application for Authorization to Inject, and its supplemental documents prepared for 3Bear Field Service, LLC's (3Bear") Smith Ranch SWD No. 1. In addition, Forms C-101 and C-102 have also been included with this package. Notices have been sent to offset, operators, leaseholders and the surface owner. Proof of notice will be sent to the OCD upon receipt.

Any questions should be directed towards 3Bear Field Service, LLC's agent Lonquist & Co., LLC.

Regards,

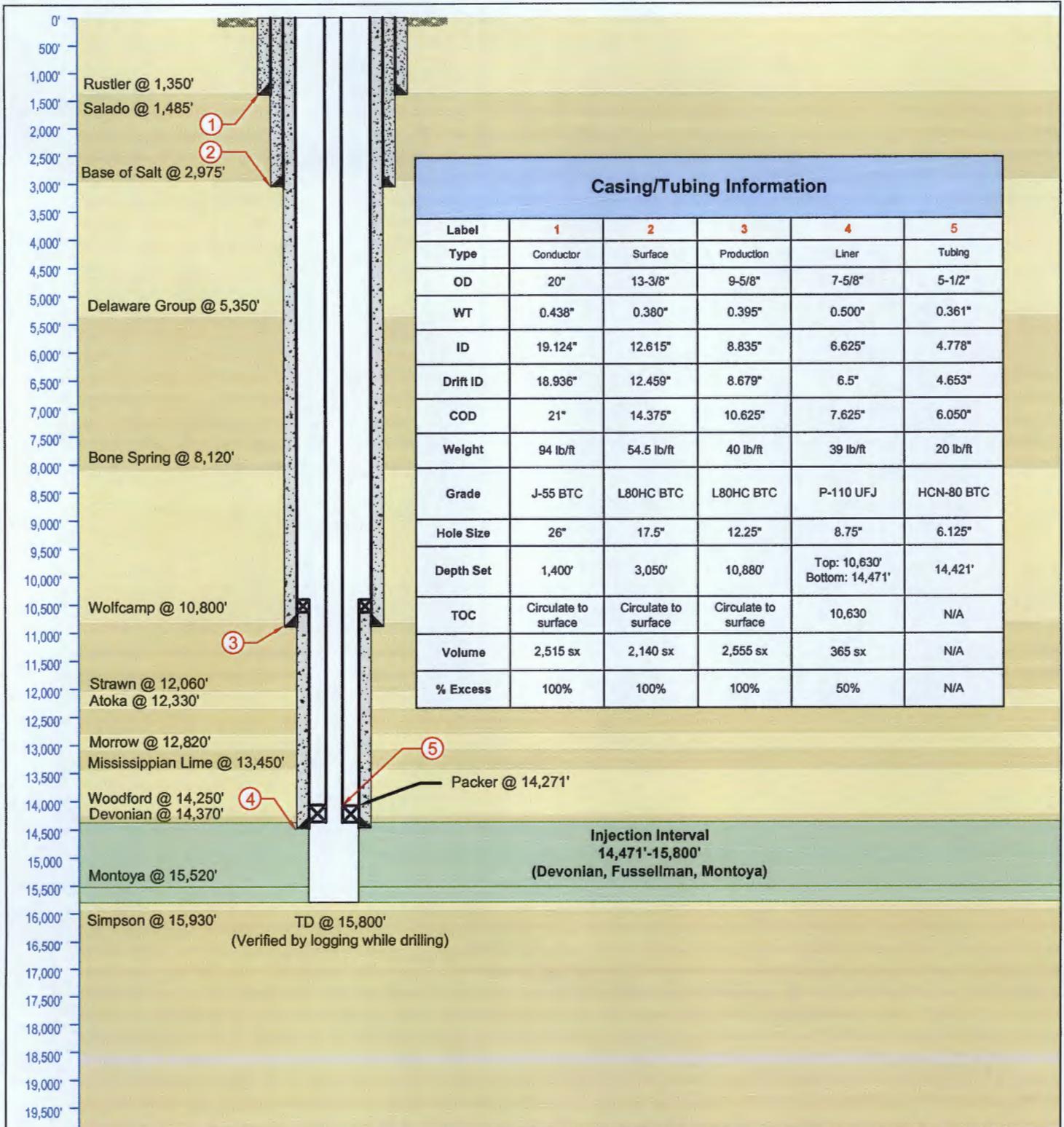


Ramona Hovey
Sr. Petroleum Engineer
Lonquist & Co., LLC

(512) 600-1777
ramona@lonquist.com

APPLICATION FOR AUTHORIZATION TO INJECT

- I. PURPOSE: _____ Secondary Recovery _____ Pressure Maintenance X Disposal _____ Storage
Application qualifies for administrative approval? X Yes _____ No
- II. OPERATOR: 3Bear Field Service, LLC
ADDRESS: 415 W. Wall St., Suite 1212
CONTACT PARTY: Kevin Burns PHONE: 432-686-2973
- 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 X No
If yes, give the Division order number authorizing the project: _____
- 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.
- VII. Attach data on the proposed operation, including:
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: Ramona Hovey TITLE: Consulting Engineer – Agent for 3Bear Field Service
SIGNATURE: Ramona Hovey DATE: 1/24/2019
E-MAIL ADDRESS: ramona@lonquist.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: _____



Casing/Tubing Information					
Label	1	2	3	4	5
Type	Conductor	Surface	Production	Liner	Tubing
OD	20"	13-3/8"	9-5/8"	7-5/8"	5-1/2"
WT	0.438"	0.380"	0.395"	0.500"	0.361"
ID	19.124"	12.615"	8.835"	6.625"	4.778"
Drift ID	18.936"	12.459"	8.679"	6.5"	4.653"
COD	21"	14.375"	10.625"	7.625"	6.050"
Weight	94 lb/ft	54.5 lb/ft	40 lb/ft	39 lb/ft	20 lb/ft
Grade	J-55 BTC	L80HC BTC	L80HC BTC	P-110 UFJ	HCN-80 BTC
Hole Size	26"	17.5"	12.25"	8.75"	6.125"
Depth Set	1,400'	3,050'	10,880'	Top: 10,630' Bottom: 14,471'	14,421'
TOC	Circulate to surface	Circulate to surface	Circulate to surface	10,630	N/A
Volume	2,515 sx	2,140 sx	2,555 sx	365 sx	N/A
% Excess	100%	100%	100%	50%	N/A

LONQUIST & CO. LLC PETROLEUM ENGINEERS ENERGY ADVISORS HOUSTON CALGARY AUSTIN WICHITA DENVER	3Bear Field Services, LLC	Smith Ranch SWD No. 1	
	Country: USA	State/Province: New Mexico	County/Parish: Lea
Location:	Site: 358 FNL, 2,362 FEL	Survey: S35-T19S-R33E	
API No: N/A	Field:	Well Type/Status: SWD	
Texas License F-9147	NMOCD District No: 1	Project No:	Date: 01/23/2019
12912 Hill Country Blvd. Ste F-200 Austin, Texas 78738 Tel: 512.732.9812 Fax: 512.732.9816	Drawn: TFM	Reviewed:	Approved:
Rev No: 1	Notes:		



3Bear Field Services, LLC

Smith Ranch SWD No. 1

FORM C-108 Supplemental Information

III. Well Data

A. Wellbore Information

1.

Well information	
Lease Name	Smith Ranch SWD
Well No.	1
Location	S-35 T-19S R-33E
Footage Location	358' FNL & 2,362' FEL

2.

a. Wellbore Description

Casing Information				
Type	Surface	Intermediate	Production	Liner
OD	20"	13.375"	9.625"	7.625"
WT	0.438"	0.38"	0.395"	0.500"
ID	19.124"	12.615"	8.835"	6.625"
Drift ID	18.936"	12.459"	8.679"	6.500"
COD	21"	14.375"	10.625"	7.625"
Weight	94 lb/ft	54.5 lb/ft	40 lb/ft	39 lb/ft
Grade	J-55 BTC	L80HC BTC	L80HC BTC	P-110 UFJ
Hole Size	26"	17.5"	12.25"	8.75"
Depth Set	1,400'	3,050'	10,880'	10,630'-14,471'

b. Cementing Program

Cement Information				
Casing String	Conductor	Intermediate	Intermediate 2	Liner
Lead Cement	Class C	Class C	Class H	
Lead Cement Volume	1,620 sks	1,485 sks	1,575 sks	
Lead Cement Density	12.2 ppg	12.7 ppg	12.7 ppg	
Tail Cement	Class C	Class C	Class H	Class H
Tail Cement Volume	895 sks	655 sks	980 sks	365 sks
Tail Cement Density	14.8 ppg	14.8 ppg	14.5 ppg	14.5 ppg
Cement Excess	100%	100%	100%	50%
TOC	Surface	Surface	Surface	10,630'
Method	Circulate to Surface	Circulate to Surface	Circulate to Surface	Logged

3. Tubing Description

Tubing Information	
OD	5.5"
WT	0.361"
ID	4.778"
Drift ID	4.653
COD	6.050"
Weight	20 lb/ft
Grade	HCN-80 BTC
Depth Set	0-14,421'

Tubing will be lined with Duoline.

4. Packer Description

7-5/8" x 5-1/2" TCPC Permanent Packer with High Temp Elastomer and Full Inconel 925 trim

B. Completion Information

1. Injection Formation: Devonian, Silurian, Fusselman, Montoya

2. Gross Injection Interval: 14,471'-15,800'

Completion Type: Open Hole

3. Drilled for injection.
4. See the attached wellbore schematic.
5. Oil and Gas Bearing Zones within area of well:

Formation	Depth
Delaware	5,350'
Bone Spring	8,120'
Wolfcamp	10,800'
Strawn	12,060'
Atoka	12,330'

VI. Area of Review

No wells within the area of review penetrate the proposed injection zone.

VII. Proposed Operation Data

1. Proposed Daily Rate of Fluids to be Injection:

Average Volume: 20,000 BPD
Maximum Volume: 25,000 BPD

2. Closed System
3. Anticipated Injection Pressure:

Average Injection Pressure: 2,156 PSI (surface pressure)
Maximum Injection Pressure: 2,874 PSI (surface pressure)

4. The injection fluid is to be locally produced water. It is expected that the source water will predominantly be from the Bone Spring and Wolfcamp formations. Attached are produced water sample analyses taken from the closest wells that feature samples from the Bone Spring, Wolfcamp, Artesia, Pennsylvanian, San Andreas, and Delaware formations.
5. The disposal interval is non-productive. No water samples are available from the surrounding area.

VIII. Geological Data

Devonian Formation Lithology:

The Devonian formation is a dolomitic ramp carbonate that occurs below the Woodford shale and above the Fusselman formation. Strata found in the Devonian formation include two major groups, the Wristen Buildups and the Thirtyone Deepwater Chert, with the Wristen being more abundant. The Wristen Groups is composed of mixed limestone and dolomites with mudstone to grainstone and boundstone textures. Porosity in the Wristen group is a result of both primary and secondary development. Present are moldic, vugular, karstic (including collapse breccia) features that allow for higher porosities and permeabilities. The Thirtyone Formation contains two end-member reservoir facies, skeletal packstones/grainstones and spiculitic chert, with most of the porosity and permeability found in the coarsely crystalline cherty dolomite. These particular characteristics allow for this formation to be a tremendous Salt Water Disposal horizon.

Fusselman Formation Lithology:

The Silurian/Ordovician Fusselman Formation is stratigraphically below the Wristen Group and is above and separated from the Montoya Formation by the Sylvan Shale. The Sylvan Shale is the lower confining layer for the proposed Smith Ranch SWD No. 1 well. Fusselman facies include a laminated skeletal wackestone in the upper part and a buildup complex in the lower part composed of ooid and bryozoan grainstones. These grainstones can also be potentially prolific zones for disposal.

Montoya Formation Lithology:

The Montoya Group of Late Ordovician age unconformably overlies the Simpson Group. The Montoya is composed of light gray to medium-dark gray, fine- to medium-crystalline, calcareous dolomite, some units of which are interbedded with shale or dark-gray limestone and some units of which contain white to very light-gray chert. The Montoya carbonate limestone dolomite sequence is dense, impermeable, and non-porous.

A. Injection Zone: Siluro-Devonian Formation

Formation	Depth
Rustler	1,350'
Salado	1,485'
Delaware	5,350'
Bone Spring	8,120'
Wolfcamp	10,800'
Strawn	12,060'
Atoka	12,330'
Morrow	12,820'
Barnett	13,070'
Mississippian Lime	13,450'
Woodford	14,250'
Devonian	14,370'
Montoya	15,520'
Simpson	15,930'

B. Underground Sources of Drinking Water

One water well exists within one mile of the proposed well. Across the area, fresh water wells are usually drilled between 50' and 850' in depth. The Rustler is known to exist in this general area and may also be another USDW and will be protected through the top of the Salado Formation at 1,485' by setting surface casing at 1,400' and intermediate casing at 3,050' below the Salado.

IX. Proposed Stimulation Program

No stimulation program planned.

X. Logging and Test Data on the Well

There are no logs or test data on the well. During the process of drilling and completion resistivity, gamma ray, and density logs will be run.

XI. Chemical Analysis of Fresh Water Wells

Attached is a map of the one (1) water well that exist within one mile of the well location. Samples from the well have been obtained and analysis results will be provided as soon as possible. A Water Right Summary from the New Mexico Office of the State Engineer is attached for water well CP-00658-POD1.

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720

District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170

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

State of New Mexico
Energy Minerals and Natural Resources
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-101
Revised July 18, 2013

AMENDED REPORT

HOE-3 OGD
NOV 29 2018
RECEIVED

F/P

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator Name and Address 3BEAR FIELD SERVICES, LLC 1512 LARIMER ST., SUITE 540 DENVER, CO 80202		² OGRID Number 372603
³ Property Code 722448		⁴ APL Number 30-025-64390
⁵ Property Name SMITH RANCH SWD		⁶ Well No. 1

7. Surface Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County
A	35	19S	33E		358	NORTH	2362	EAST	LEA

8. Proposed Bottom Hole Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County

9. Pool Information

Pool Name SWD; DEVONIAN-SILURIAN	Pool Code 97869
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Additional Well Information

¹¹ Work Type N	¹² Well Type S	¹³ Cable/Rotary R	¹⁴ Lease Type S F	¹⁵ Ground Level Elevation 3258 3595
¹⁶ Multiple YES	¹⁷ Proposed Depth 15,800'	¹⁸ Formation SILURO-DEVONIAN	¹⁹ Contractor JDC DRILLING	²⁰ Spud Date UPON APPROVAL OF C-108
Depth to Ground water 110'		Distance from nearest fresh water well 2963'		Distance to nearest surface water 11,600 (LAGUNA TONTO)

We will be using a closed-loop system in lieu of lined pits

21. Proposed Casing and Cement Program

Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
SURF	26"	20.0"	94# J-55	1400	2515	0
INTER	17.5	13.375"	54.5# J-55	3050	2140	0
<i>PROD</i> INTER-2	12.25"	9.625"	40# L-80 HC	10880	2555	0

Casing/Cement Program: Additional Comments

LINER/8.75"/7.625"/39# P-110 UFJ/14471/365 SXS/TOC @ 10630'; OPEN HOLE FROM 1400'-15800'; PLEASE SEE ATTACHED WBD

22. Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
	SEE ATTACHMENT		

²³ I hereby certify that the information given above is true and complete to the best of my knowledge and belief.
I further certify that I have complied with 19.15.14.9 (A) NMAC and/or 19.15.14.9 (B) NMAC if applicable.

Signature: *Jennifer Elrod*

Printed name: JENNIFER ELROD

Title: SR. REGULATORY TECH

E-mail Address: jelrod@chisholmenergy.com

Date: 11/29/2018

Phone: 817-953-3728

OIL CONSERVATION DIVISION

Approved By:

J. Elrod

Title: Petroleum Engineer

Approved Date: 12/04/18

Expiration Date: 12/04/20

Conditions of Approval Attached

**See Attached
Conditions of Approval**

CONDITIONS OF APPROVAL

API #	Operator	Well name & Number
30-025-45390	3BEAR FIELD SERVICES LLC	SMITH RANCH SWD # 001

Applicable conditions of approval marked with XXXXXX

Administrative Orders Required

XXXXXXX	Review administrative order when approved for additional conditions of approval

Other wells

Casing

XXXXXXX	1) SURFACE & INTERMEDIATE CASING - Cement must circulate to surface -- 2) PRODUCTION CASING - Cement must circulate to surface -- 3) Liner – Cement must tie back into production casing
XXXXXXX	Surface casing must be set 25' below top of Rustler Anhydrite in order to seal off protectable water

Lost Circulation

XXXXXXX	Must notify OCD Hobbs Office if lost circulation is encountered at 575-370-3186

Water flows

XXXXXXX	Must notify OCD Hobbs Office of any water flow in the Salado formation at 575-370-3186. Report depth and flow rate.

Stage Tool

XXXXXXX	Must notify OCD Hobbs Office prior to running Stage Tool at 575-370-3186
XXXXXXX	If using Stage Tool on Surface casing, Stage Tool must be greater than 350' and a minimum 200 feet above surface shoe.
XXXXXXX	When using a Stage Tool on Intermediate or Production Casing Stage must be a minimum of 50 feet below previous casing shoe.

Completion & Production

XXXXXXX	Will require a deviational survey with the C-105
XXXXXXX	Must notify Hobbs OCD office prior to conducting MIT (575) 393-6161 ext. 114
XXXXXXX	May not inject prior to SWD order approval
XXXXXXX	Must conduct & pass MIT prior to any injection

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

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

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

NOV 29 2018
RECEIVED

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 70-025-45390	² Pool Code 97869	³ Pool Name SILURO-DEVONIAN
⁴ Property Code 322448	⁵ Property Name SMITH RANCH SWD	⁶ Well Number 1
⁷ OGRID No. 372603	⁸ Operator Name 3BEAR FIELD SERVICES, LLC	⁹ Elevation 3595'

¹⁰ Surface Location

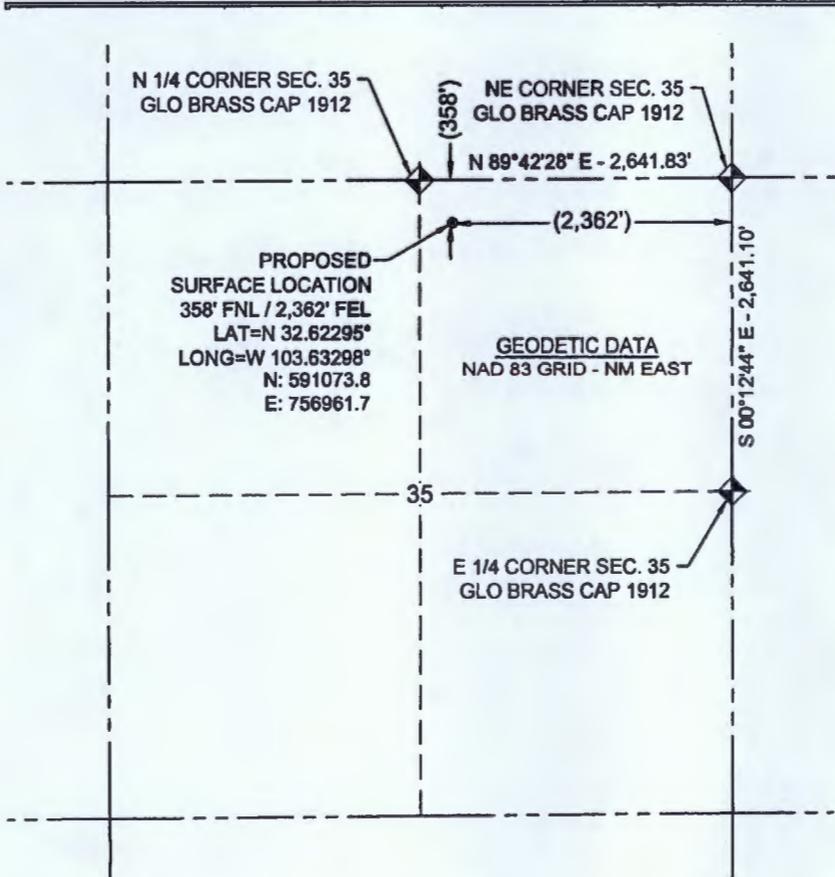
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
NE 1/4 (A)	35	19S	33E		358	NORTH	2,362	EAST	LEA

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

¹² Dedicated Acres	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ 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.



¹⁷ OPERATOR CERTIFICATION
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Jennifer Elrod 11/29/2018
Signature Date

JENNIFER ELROD
Printed Name

jelrod@chisholmenergy.com
E-mail Address

¹⁸ SURVEYOR CERTIFICATION
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

6/02/18
Date of Survey

Signature and Seal of Professional Surveyor:

22896
Certificate Number

From: Bell, Ric [<mailto:Ric.Bell@mosaicco.com>]
Sent: Tuesday, November 6, 2018 10:48 AM
To: Kevin Burns <kburns@3bearllc.com>; jrutley@blm.gov
Cc: Douglas Swanson <tbarsllc@aol.com>; Morehouse, Dan <Dan.Morehouse@mosaicco.com>
Subject: 3 Bear Energy SWD Wells

Kevin,
Mosaic will not object to the #2 Smith Ranch SWD located 1297'FNL, 1154FEL, Sec 25, T19S, R33E. We will also not object to the #1 Smith Ranch SWD located 358'FNL, 2362FEL, Sec 35, T19S, R33E.
Cheers,
Ric



Ric Bell | Senior Geologist
The Mosaic Company | 1361 Potash Mines Road | Carlsbad, New Mexico, 88220
P: 575.628.6242 | C: 575.361.3854 | E: ric.bell@mosaicco.com |
W: www.mosaicco.com

From: Rutley, James [<mailto:jrutley@blm.gov>]
Sent: Tuesday, November 6, 2018 9:32 AM
To: Kevin Burns <kburns@3bearllc.com>
Cc: Bell, Ric - Carlsbad (Third Party) <ric.bell@mosaicco.com>; Douglas Swanson <tbarsllc@aol.com>; dan.morehouse@mosaicco.com
Subject: Re: [EXTERNAL] FW: 3 Bear Energy proposed SWD well 19-33 Sec 35

Good Morning Kevin,

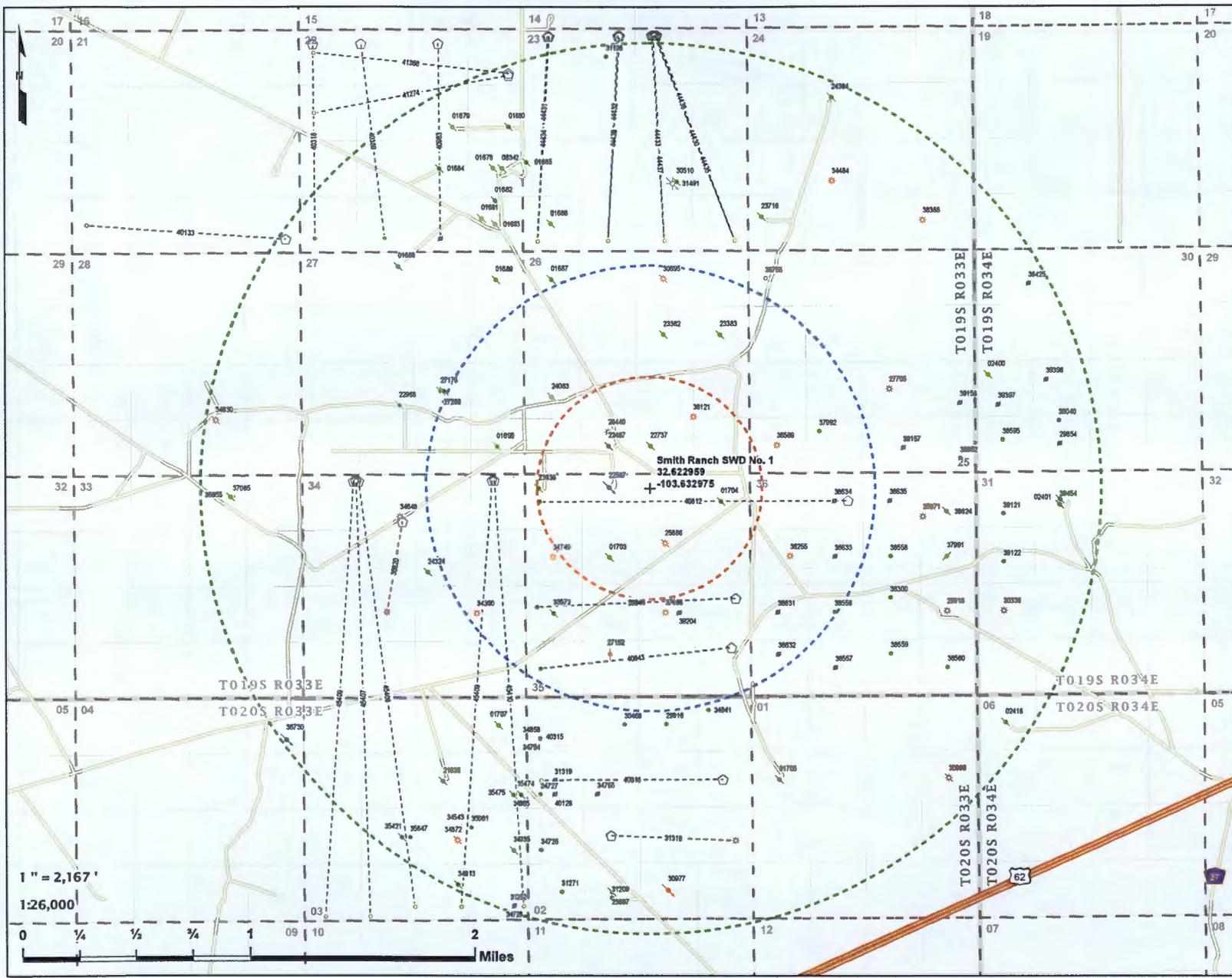
I apologize for not getting back to you sooner. We're a little thin staffed in geology department with two employees going to other departments both in our office and the State Office. Covering a lot of ground till the positions are filled.

I have reviewed both Smith Ranch SWD locations in Sections 25 and 35 of 19S 33E. BLM has no concern with either location as staked. The Section 35 well is within the corridor for drilling being established to the east and west of this location. The Section 25 well is outside of R-111-P and development area is not required.

Thank you for running the locations by me.

Jim

James S. Rutley



Smith Ranch SWD No. 1
2 Mile Area of Review
3 Bear Field Services LLC
 Lea County, NM

PCS: NAD 1983 SPCS NM-E FIPS 3001 (US Ft.)

Drawn by: SJL Date: 1/21/2019 Approved by: TFM

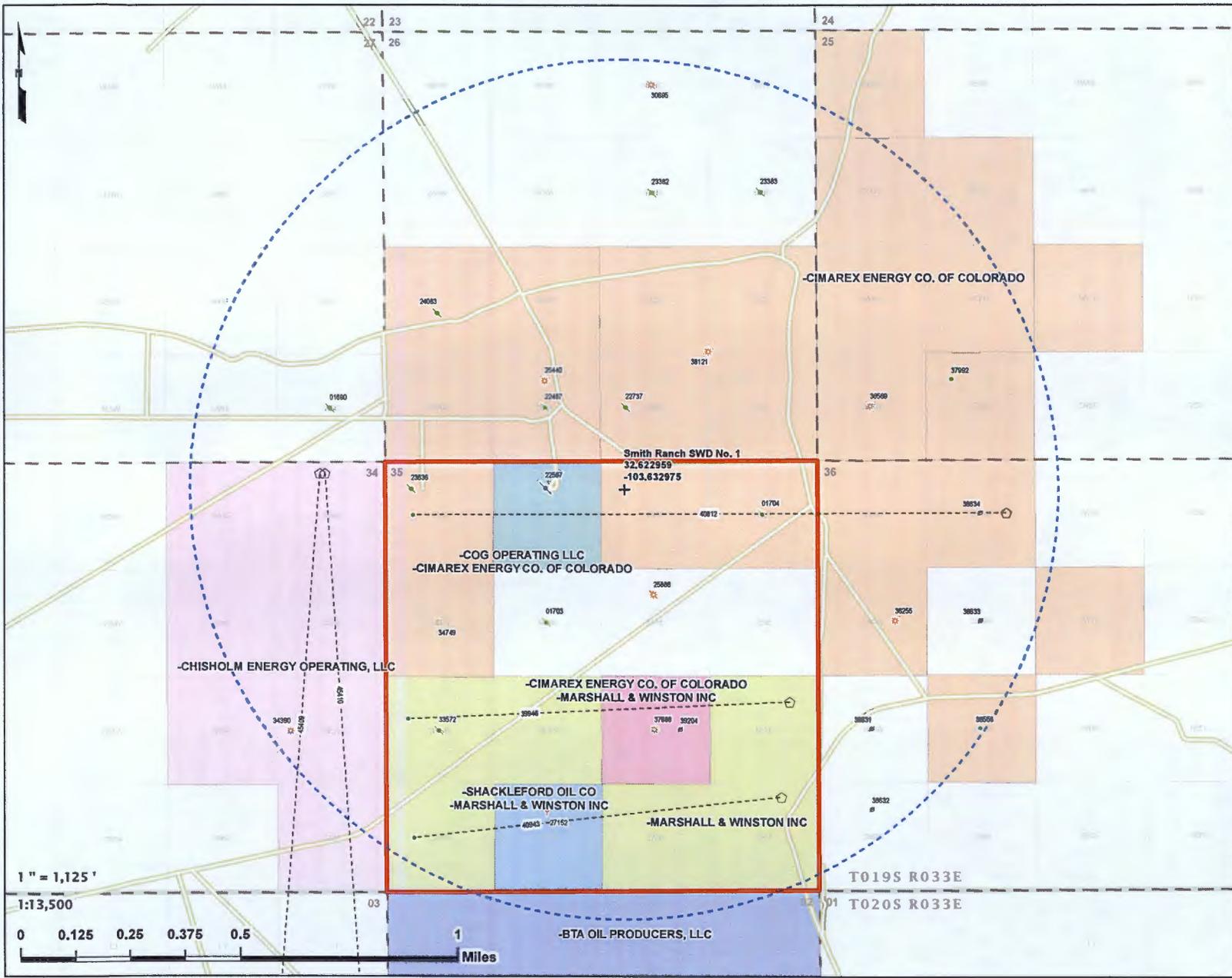
LONQUIST & CO. LLC
 PETROLEUM ENGINEERS ENERGY ADVISORS
 AUSTIN HOUSTON WICHITA DENVER CALGARY

- ⊕ Smith Ranch SWD No. 1
 - 1/2 Mile Radius
 - 1 Mile Radius
 - 2 Mile Radius
 - QQ-Section [NM-PLSS 2nd Div.]
 - 1 Section [NM-PLSS 1st Div.]
 - Township/Range [NM-PLSS]
 - Laterals
 - API (30-025-...) SHL Status - Type (Count)
 - Horizontal Surface Location (26)
 - Active - Oil (24)
 - ★ Active - Gas (15)
 - ⚡ Active - Salt Water Disposal (2)
 - ⚡ Active - Injection (1)
 - Permitted - Gas (1)
 - ⚡ Plugged (Not Released) - Oil (1)
 - ⚡ Plugged (Site Released) - Oil (45)
 - ⚡ Plugged (Site Released) - Gas (5)
 - ⚡ Plugged (Site Released) - Salt Water Disposal (1)
 - ⚡ Expired TA - Gas (1)
 - Canceled Location (20)
 - API (30-025-...) BHL Status - Type (Count)
 - Active - Oil (5)
 - ★ Active - Gas (2)
 - Permitted - Oil (18)
 - Canceled Location (1)
- *Well Data Source: NM-OCDDrillingInfo (2019)



Smith Ranch SWD No. 1
1 Mile Area of Review List

API (30-025-...)	WELL NAME	WELL TYPE	STATUS	OPERATOR	TVD (FT.)	LATITUDE (NAD83 DD)	LONGITUDE (NAD83 DD)	DATE DRILLED	FIELD
01690	PRE-ONGARD WELL #001	O	P	PRE-ONGARD WELL OPERATOR	3525	32.6257553000	-103.6446609000	9/28/1948	-
01703	PRE-ONGARD WELL #001	O	P	PRE-ONGARD WELL OPERATOR	8615	32.6184883000	-103.6361084000	12/14/1956	-
01704	PRE-ONGARD WELL #001	O	P	PRE-ONGARD WELL OPERATOR	4150	32.6221046000	-103.6275390000	NR	-
22487	BATE FEDERAL #001	O	P	COG OPERATING LLC	3397	32.6257439000	-103.6360855000	4/28/1968	[27390] GEM, YATES, EAST
22597	BATE FEDERAL #003	S	A	COG OPERATING LLC	3514	32.6230240000	-103.6360931000	5/31/1968	[96090] SWD, YATES; [96141] SWD, YATES-SEVEN RIVERS
22737	PRE-ONGARD WELL #001	O	P	PRE-ONGARD WELL OPERATOR	3570	32.6257401000	-103.6328812000	9/10/1968	-
23382	PRE-ONGARD WELL #001	O	P	PRE-ONGARD WELL OPERATOR	3655	32.6329880000	-103.6317825000	11/29/1969	-
23383	PRE-ONGARD WELL #001	O	P	PRE-ONGARD WELL OPERATOR	70	32.6329842000	-103.6274948000	11/30/1969	-
23636	PRE-ONGARD WELL #001	O	P	PRE-ONGARD WELL OPERATOR	3406	32.6230316000	-103.6414490000	11/24/1970	-
24083	PRE-ONGARD WELL #002	O	P	PRE-ONGARD WELL OPERATOR	3453	32.6289673000	-103.6403580000	4/10/1972	-
25886	LAGUNA DEEP FEDERAL #001	G	P	CIMAREX ENERGY CO. OF COLORADO	14753	32.6193886000	-103.6318359000	7/29/1978	[58960] TEAS, BONE SPRING; [77380] GEM, MORROW, EAST (GAS)
26440	LAGUNA DEEP FEDERAL UNIT #002	G	A	CIMAREX ENERGY CO. OF COLORADO	13490	32.6266518000	-103.6360779000	11/8/1979	[58960] TEAS, BONE SPRING; [77380] GEM, MORROW, EAST (GAS)
27152	LAGUNA DEEP FEDERAL #003	G	E	SHACKELFORD OIL CO	13600	32.6121445000	-103.6361313000	8/30/1981	[27390] GEM, YATES, EAST; [58960] TEAS, BONE SPRING; [77380] GEM, MORROW, EAST (GAS)
30695	LAGUNA DEEP FEDERAL UNIT #004	G	P	CIMAREX ENERGY CO. OF COLORADO	13560	32.6366158000	-103.6317673000	10/16/1989	[77380] GEM, MORROW, EAST (GAS)
33572	GEM 35 FEDERAL #001	O	P	BEPCO, LP	9500	32.6148682000	-103.6404114000	9/6/1996	[96838] DRY AND ABANDONED
34390	JADE 34 FEDERAL #001	G	A	CHISHOLM ENERGY OPERATING, LLC	13690	32.6148720000	-103.6462860000	12/4/2009	[58960] TEAS, BONE SPRING; [77380] GEM, MORROW, EAST (GAS)
34749	LAGUNA DEEP FEDERAL UNIT #005	G	A	CIMAREX ENERGY CO. OF COLORADO	13650	32.6184921000	-103.6403961000	11/2/1999	[58960] TEAS, BONE SPRING; [77380] GEM, MORROW, EAST (GAS)
36255	LAGUNA DEEP UNIT #007	G	A	CIMAREX ENERGY CO. OF COLORADO	13617	32.6184692000	-103.6223221000	6/11/2003	[2260] APACHE RIDGE, BONE SPRING; [77380] GEM, MORROW, EAST (GAS); [96485] QUAIL RIDGE, ATOKA (GAS)
36569	LAGUNA DEEP UNIT #008	G	A	CIMAREX ENERGY CO. OF COLORADO	13660	32.6257286000	-103.6232300000	8/22/2005	[77380] GEM, MORROW, EAST (GAS)
37686	LAGUNA DEEP UNIT #009	G	A	CIMAREX ENERGY CO. OF COLORADO	13635	32.6148605000	-103.6318512000	8/1/2006	[59500] TONTO, WOLFCAMP
37992	LAGUNA DEEP UNIT #012	O	A	CIMAREX ENERGY CO. OF COLORADO	10460	32.6266327000	-103.6200104000	8/4/2006	[2260] APACHE RIDGE, BONE SPRING
38121	LAGUNA DEEP UNIT #010	G	A	CIMAREX ENERGY CO. OF COLORADO	13669	32.6276054000	-103.6295929000	11/16/2006	[77380] GEM, MORROW, EAST (GAS)
38556	LAGUNA DEEP UNIT #016	O	A	CIMAREX ENERGY CO. OF COLORADO	10430	32.6148491000	-103.6189880000	10/11/2007	[2260] APACHE RIDGE, BONE SPRING
38631	LAGUNA DEEP UNIT #018	O	C	CIMAREX ENERGY CO. OF COLORADO	0	32.6148540840	-103.623267787	-	[2260] APACHE RIDGE, BONE SPRING
38632	LAGUNA DEEP UNIT #019	O	C	CIMAREX ENERGY CO. OF COLORADO	0	32.6121191504	-103.623278946	-	[2260] APACHE RIDGE, BONE SPRING
38633	LAGUNA DEEP UNIT #020	O	C	CIMAREX ENERGY CO. OF COLORADO	0	32.6184684677	-103.618945447	-	[2260] APACHE RIDGE, BONE SPRING
38634	LAGUNA DEEP UNIT #021C	O	C	CIMAREX ENERGY CO. OF COLORADO	0	32.6220967188	-103.618930626	-	[2260] APACHE RIDGE, BONE SPRING
39204	LAGUNA DEEP UNIT #022J	O	C	MURCHISON OIL & GAS INC	0	32.6148602127	-103.630806107	-	[58960] TEAS, BONE SPRING
39946	LAGUNA DEEP UNIT 35 FEDERAL #001	O	A	MARSHALL & WINSTON INC	9341	32.6157646000	-103.6264877000	11/7/2010	[58960] TEAS, BONE SPRING
40812	LAGUNA DEEP UNIT #021H	O	A	CIMAREX ENERGY CO. OF COLORADO	9380	32.6220970000	-103.6178894000	11/16/2012	[58960] TEAS, BONE SPRING
40943	LAGUNA DEEP UNIT 35 FEDERAL #002H	O	A	MARSHALL & WINSTON INC	9429	32.6125488000	-103.6268463000	7/4/2013	[58960] TEAS, BONE SPRING
45409	JADE 34 3 2BS FEDERAL COM #007H	O	N	CHISHOLM ENERGY OPERATING LLC	0	32.6235430000	-103.6450820000	-	[58960] TEAS, BONE SPRING
45410	JADE 34 3 2BS FEDERAL COM #008H	O	N	CHISHOLM ENERGY OPERATING LLC	0	32.6235430000	-103.6448860000	-	[58960] TEAS, BONE SPRING

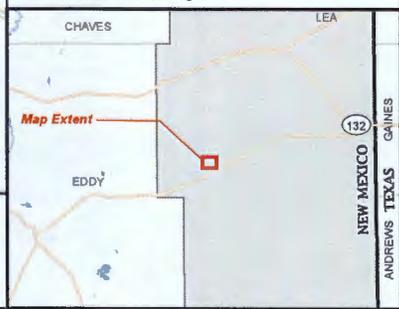


Smith Ranch SWD No. 1
1 Mile Offset Operators
3Bear Field Services LLC
 Lea County, NM

PCS: NAD 1983 SPCS NM-E FIPS 3001 (US Ft.)
 Drawn by: SJL | Date: 1/22/2019 | Approved by: TFM

LONQUIST & CO. LLC
 PETROLEUM ENGINEERS | ENERGY ADVISORS
 AUSTIN | HOUSTON | WICHITA | DENVER | CALGARY

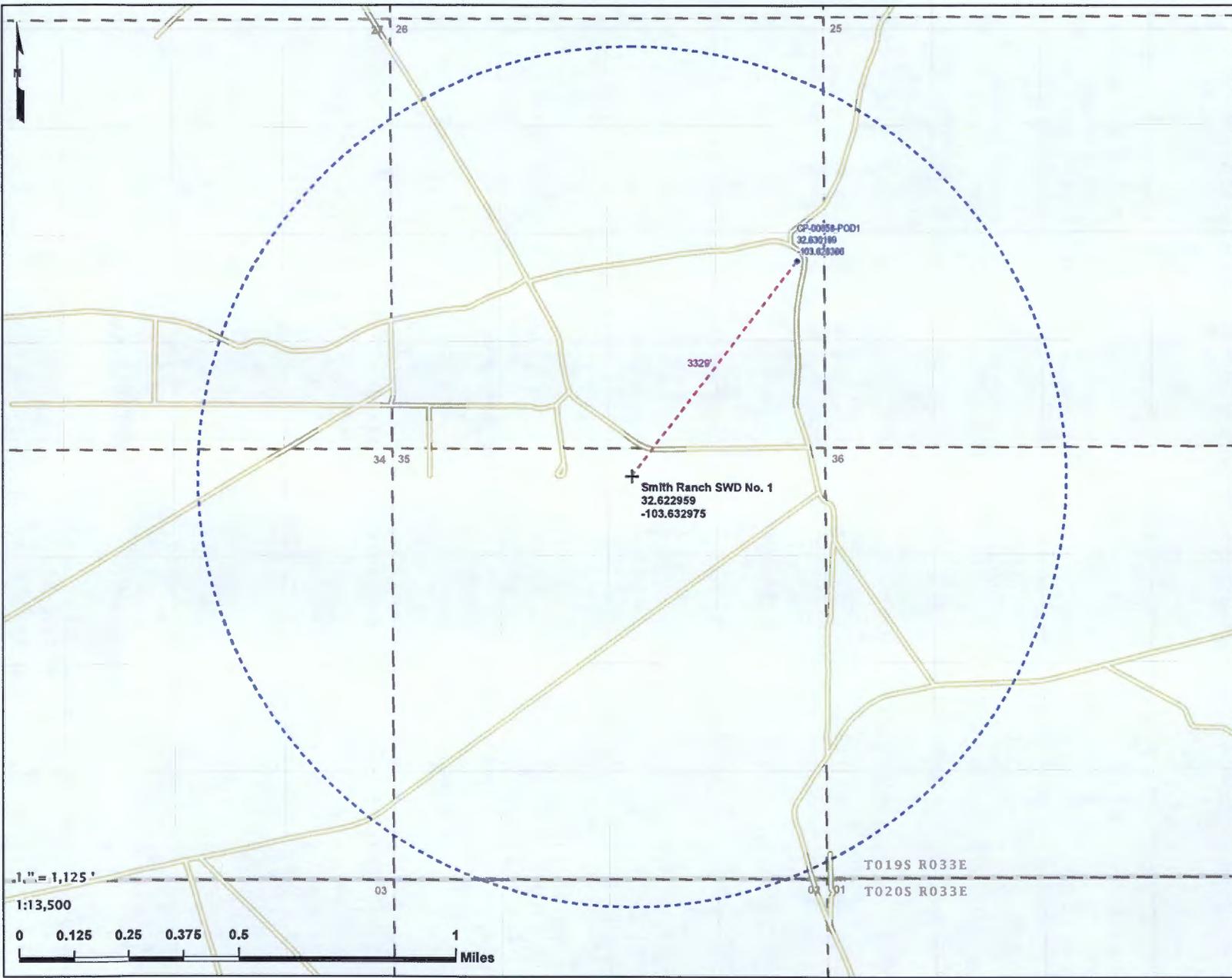
- + Smith Ranch SWD No. 1 BHL
 - - - 1 Mile Radius
 - - - QG-Section [NM-PLSS 2nd Div.]
 - - - 1 Section [NM-PLSS 1st Div.]
 - - - Township/Range [NM-PLSS]
 - - - Surface Owner Property Boundary (Smith Kenneth INC)
 - - - Laterals
 - API (20-425-...) BHL Status - Type (Count)
 - Horizontal Surface Location (5)
 - Active - Oil (2)
 - ★ Active - Gas (7)
 - ▲ Active - Salt Water Disposal (1)
 - ⊘ Plugged (Site Released) - Oil (10)
 - ⊘ Plugged (Site Released) - Gas (2)
 - ◆ Expired TA - Gas (1)
 - Canceled Location (5)
 - API (20-425-...) BHL Status - Type (Count)
 - Active - Oil (2)
 - Permitted - Oil (2)
- Operators**
- BTA OIL PRODUCERS, LLC
 - CHISHOLM ENERGY OPERATING, LLC
 - CIMAREX ENERGY CO. OF COLORADO
 - CIMAREX ENERGY CO. OF COLORADO; -MARSHALL & WINSTON INC
 - COG OPERATING LLC; -CIMAREX ENERGY CO. OF COLORADO
 - MARSHALL & WINSTON INC
 - SHACKLEFORD OIL CO; -MARSHALL & WINSTON INC
- *Well Data Source: NM-OCDDrillingInfo (2019)



**Smith Ranch SWD No. 1
1 Mile Offset Operators and Lessees List**

S/T/R	QQ UNIT LETTER(S)	OPERATOR	MINERAL LESSEE	MINERAL OWNER	SURFACE OWNER	ADDRESS 1	ADDRESS 2
27/19S/33E	A,G,H,I,J,O,P	-	OCCIDENTAL PERMIAN LP	-	-	5 E GREENWAY PLAZA #110	HOUSTON, TX 77046
28/19S/33E	L,J,K,L,M,N,O,P	CIMAREX ENERGY CO. OF COLORADO	-	-	-	202 S. CHEYENNE AVE. SUITE 1000	TULSA, OK 74103
	A,B,C,D,E,F,G,H	-	MAGNUM HUNTER PRODUCTION INC	-	-	202 S. CHEYENNE AVE. SUITE 1000	TULSA, OK 74103
25/19S/33E	D,E,F,J,K,L,M,N	CIMAREX ENERGY CO. OF COLORADO	-	-	-	202 S. CHEYENNE AVE. SUITE 1000	TULSA, OK 74103
	D	-	-	PRIVATE (UNKNOWN)	SMITH KENNETH INC	267 SMITH RANCH RD	HOBBS, NM 88240
36/19S/33E	C,D,E,G,K	CIMAREX ENERGY CO. OF COLORADO	-	-	-	202 S. CHEYENNE AVE. SUITE 1000	TULSA, OK 74103
	F	-	UNION OIL CO OF CALIF	-	-	PO BOX 2100	HOUSTON, TX 77210
	B	-	MAGNUM HUNTER PRODUCTION INC	-	-	600 N MARIENFELD STREET, SUITE 800	MIDLAND, TX 79701
	L,M,N	-	DEVON ENERGY PRODUCTION COMPANY, LP	-	-	333 W. SHERIDAN AVENUE	OKLAHOMA CITY, OK 73102
35/19S/33E	A,B,D,E	CIMAREX ENERGY CO. OF COLORADO	-	-	-	202 S. CHEYENNE AVE. SUITE 1000	TULSA, OK 74103
	C	CIMAREX ENERGY CO. OF COLORADO	-	-	-	202 S. CHEYENNE AVE. SUITE 1000	TULSA, OK 74103
	I,K,L,M,O,P	COG OPERATING LLC	-	-	-	550 W TEXAS	MIDLAND, TX 79701
	J	MARSHALL & WINSTON INC	-	-	-	PO BOX 50880	MIDLAND, TX 79710
	N	MARSHALL & WINSTON INC	-	-	-	PO BOX 50880	MIDLAND, TX 79710
	F,G,H	-	MAGNUM HUNTER PRODUCTION INC	-	-	202 S. CHEYENNE AVE. SUITE 1000	TULSA, OK 74103
34/19S/33E	A,B,G,H,I,J,P	CHISHOLM ENERGY OPERATING, LLC	-	-	-	801 CHERRY STREET	FORT WORTH, TX 76102
2/20S/33E	A,B,C,D	BTA OIL PRODUCERS, LLC	-	-	-	104 S PECOS	MIDLAND, TX 79701
Surface Location	-	-	-	-	SMITH KENNETH INC	267 SMITH RANCH RD	HOBBS, NM 88240

Smith Ranch SWD No. 1 Offsetting Produced Water Analysis																		
Well Name	API	Section	Township	Range	Unit	Formation	ph	TDS (mg/L)	Sodium (mg/L)	Calcium (mg/L)	Iron (mg/L)	Magnesium (mg/L)	Manganese (mg/L)	Chloride (mg/L)	Bicarbonate (mg/L)	Sulfate (mg/L)	CO2 (mg/L)	
MAGNOLIA STATE #001	3002501701	32	19S	33E	B	ARTESIA		8771						4301	1538		180	
NELLIS FEDERAL #003	3002526091	6	19S	33E	F	ARTESIA	6.8	70660						42600	549		365	
BATE FEDERAL #003	3002522597	35	19S	33E	C	ARTESIA	7.8	117622						66700	506		5800	
NELLIS A FEDERAL #004	3002525912	8	19S	33E	E	BONE SPRING	6.9	48582						28900	763		160	
MALACHITE 22 FEDERAL #001H	3002540318	22	19S	33E	D	BONE SPRING 1ST SAND	6.4		73407	1293	33	265	0.26	116995	780	480	250	
PLAYA 2 STATE #001H	3002540405	2	19S	34E	N	BONE SPRING 3RD SAND	6.5	182368	41880	7125	31.4	1158	1.06	81893	353.8	823	190	
PLAYA 2 STATE #002H	3002540549	2	19S	34E	M	BONE SPRING 3RD SAND	6.48	182368	41450	8421	28.1	1264	0.8	85041	362	956	180	
LUSK AHB FEDERAL #002	3002531042	35	19S	32E	G	DELAWARE	6.05	220235		22044	45	3525		136969	122		450	
LUSK AHB FEDERAL #005	3002531151	35	19S	32E	B	DELAWARE	6.86	172408		12024	28	1945		104976	146		1800	
LUSK AHB FEDERAL #006	3002531314	35	19S	32E	A	DELAWARE	6.86	125179		4509	8	1520		74983	220		2900	
LUSK AHB FEDERAL #006	3002531314	35	19S	32E	A	DELAWARE	7.1	125396		3507	8	912		69984	303		7400	
NEW MEXICO 24 FEDERAL COM #0	3002539741	24	18S	33E	A	DELAWARE-CHERRY CANYO	7.07	232774.2	67508.7	15857	8	3523	0.2	143232	73.2		887	240
STATE CL #003	3002501575	2	18S	33E	D	GRAYBURG/SAN ANDRES		76321						44800	450		3000	
INEXCO AHY FEDERAL #001	3002525470	7	19S	33E	H	PENNSYLVANIAN	6.5			5600	50	975.3		37062	610		12.5	
BUFFALO FEDERAL UNIT #004	3002501661	4	19S	33E	H	PENNSYLVANIAN		163468						99880	415		848	
FEDERAL AC #002	3002501675	18	19S	33E	E	PENNSYLVANIAN		1305						140	232		510	
LAGUNA PLATA FEDERAL #001	3002501678	22	19S	33E	I	WOLFCAMP		46915						27270	714		1116	



Smith Ranch SWD No. 1
Water Wells within 1 Mile
 3Bear Field Services LLC
 Lea County, NM

PCS: NAD 1983 SPCS NM-E FIPS 3001 (US Ft.)
 Drawn by: SJL | Date: 1/22/2019 | Approved by: TFM

LONQUIST & CO. LLC
 PETROLEUM ENGINEERS | ENERGY ADVISORS
 AUSTIN · HOUSTON · WICHITA · DENVER · CALGARY

+ Smith Ranch SWD No. 1
 • Water Well (1)
 [Dashed Circle] 1 Mile Radius
 - - - Distance Call
 QQ-Section [NM-PLSS 2nd Div.]
 | - - Section [NM-PLSS 1st Div.]
 Township/Range [NM-PLSS]

*Nearest surface water: 11,173' to the SWW
 **Water Well Data Source: NM - OSE (2019)

Inset map showing the location of Smith Ranch SWD No. 1 in Lea County, NM. The map shows the county boundaries of Chaves, Eddy, and Gains counties. Major roads 82, 132, 83, and 283 are shown. A red square indicates the location of Smith Ranch SWD No. 1 in Lea County. The map is labeled "Map Extent" and "NEW MEXICO ANDREAS TEXAS".



New Mexico Office of the State Engineer

Water Right Summary



WR File Number: CP 00658 **Subbasin:** CP **Cross Reference:** -
Primary Purpose: PLS NON 72-12-1 LIVESTOCK WATERING
Primary Status: DCL DECLARATION
Total Acres: 0 **Subfile:** -
Total Diversion: 2 **Cause/Case:** -
Owner: KENNETH SMITH

Documents on File

Trn #	Doc	File/Act	Status		Transaction Desc.	From/	Acres	Diversion	Consumptive
			1	2		To			
547000	COWNF	1993-08-23	CHG	PRC	CP 00658	T	0	0	
546999	DCL	1982-11-17	DCL	PRC	CP 00658	T	0	2	

Current Points of Diversion

POD Number	Well Tag	Source	Q Q Q			X	Y	Other Location Desc
			64	16	4			
CP 00658 POD1	Shallow	2 2 4	26	19S	33E	628857	3611125*	

(NAD83 UTM in meters)

An () after northing value indicates UTM location was derived from PLSS - see Help

Priority Summary

Priority	Status	Acres	Diversion	Pod Number	Source
12/31/1920	DCL	0	2	CP 00658 POD1	Shallow

Place of Use

Q Q Q Q				Acres	Diversion	CU	Use	Priority	Status	Other Location Desc
256	64	16	4							
				0	2		PLS	12/31/1920	DCL	NO PLACE OF USE GIVEN

Source

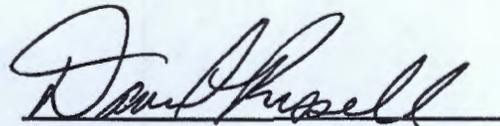
Acres	Diversion	CU	Use	Priority	Source Description
0	2		PLS	12/31/1920	GW

Affidavit of Publication

STATE OF NEW MEXICO
COUNTY OF LEA

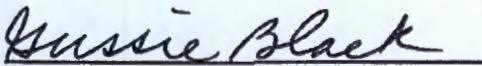
I, Daniel Russell, Publisher of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, solemnly swear that the clipping attached hereto was published in the regular and entire issue of said newspaper, and not a supplement thereof for a period of 1 issue(s).

Beginning with the issue dated
August 03, 2018
and ending with the issue dated
August 03, 2018.



Publisher

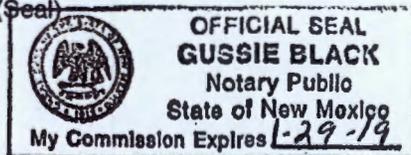
Sworn and subscribed to before me this
3rd day of August 2018.



Business Manager

My commission expires
January 29, 2019

(Seal)



LEGALIS

LEGAL NOTICE
August 3, 2018

3Bear Field Services, LLC is applying to drill the Smith Ranch SWD-1 as a saltwater disposal well. Disposal will be in the Silurian and Devonian from 13,977' MD-15477' MD. The well will be located 33.8 miles northwest from Monument, NM @ 358 ENL & 2362.FEL, Sec. 35, T 19S, R-33E, Lea County, NM. Maximum injection rate proposed is 26,000 bpd with an avg. injection rate of 20,000 bpd. Maximum injection pressure proposed is 2,340 psi. Interested parties must file objections or requests for hearing with the E.N.M.R.D. Oil Conservation Division, 1220 South Saint Francis Dr., Santa Fe, NM 87505 within 15 days.

Additional information can be obtained by contacting Jennifer Elrod, Chisholm Energy Operating, 801 Cherry St., Suite 1200-Unit 20, Fort Worth, TX 76102; (817)953-3728; #33066

67115144

00216020

BETTIE WATSON
CHISHOLM ENERGY OPERATING, LLC
801 CHERRY ST. STE 1200-UNIT 20
FORT WORTH, TX 76102

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

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:

**OIL CONSERVATION DIVISION
DISTRICT 1
1625 N FRENCH DR
HOBBS, NM 88240
1774-SMITH RANCH SWD #1**



9590 9402 4057 8079 2008 75

2. Article Number (Transfer from service label)

7018 1830 0000 8887 7998

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

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
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

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- Adult Signature Restricted Delivery \$ _____

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Total P_c

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City, St_e

Postmark
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**OIL CONSERVATION DIVISION
DISTRICT 1
1625 N FRENCH DR
HOBBS, NM 88240
1774-SMITH RANCH SWD #1**

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

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- 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:

**KENNETH SMITH INC
267 SMITH RANCH ROAD
HOBBS NM 88240**

1774-SMITH RANCH SWD #1



9590 9402 4057 8079 2008 82

2. Article Number (Transfer from service label)

7018 1830 0000 8887 8001

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

X

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

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

3. Service Type

<input checked="" type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

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

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<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		
\$ _____		<p>KENNETH SMITH INC 267 SMITH RANCH ROAD HOBBS NM 88240</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
Total \$ _____		
Sent \$ _____		
State _____		
City _____		

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

**CIMAREX ENERGY CO OF COLORADO
202 S CHEYENNE AVE, STE 1000
TULSA OK 74103**

1774-SMITH RANCH SWD #1



9590 9402 4057 8079 2008 99

2. Article Number (Transfer from previous label)

7018 1830 0000 8887 8018

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

Insured Mail Restricted Delivery (over \$500)

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

CERTIFIED MAIL®



7018 1830 0000 8887 8018
7018 1830 0000 8887 8018

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee

\$

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

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage

\$

Tot

\$

Se

St

Cit

**CIMAREX ENERGY CO OF COLORADO
202 S CHEYENNE AVE, STE 1000
TULSA OK 74103**

1774-SMITH RANCH SWD #1

Postmark
Here

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

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:

**COG OPERATING LLC
550 W TEXAS
MIDLAND TX 79701**

1774-SMITH RANCH SWD #1



9590 9402 4057 8079 2009 05

2. Article Number (Transfer from carrier label)

7018 1830 0000 8887 8025

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

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
- Insured Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

CERTIFIED MAIL®



7018 1830 0000 8887 8025

7018 1830 0000 8887 8025

**U.S. Postal Service™
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For delivery information, visit our website at www.usps.com™.

OFFICIAL USE

Certified Mail Fee

\$

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

- Return Receipt (hardcopy) \$ _____
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postmark
Here

Postage

\$

Total

\$

Sen

Stre

City

**COG OPERATING LLC
550 W TEXAS
MIDLAND TX 79701**

1774-SMITH RANCH SWD #1

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

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:
MARSHALL & WINSTON INC
PO BOX 50880
MIDLAND TX 79701

1774-SMITH RANCH SWD #1



9590 9402 4057 8079 2009 12

2. Article Number (Transfer from service label)
7018 1830 0000 8887 8032

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Agent
 Addressee

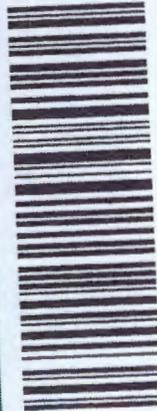
B. Received by (Printed Name) C. Date of Delivery

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

3. Service Type
- | | |
|--|---|
| <input checked="" type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS FOLD AT DOTTED LINE
CERTIFIED MAIL®



7018 1830 0000 8887 8032
 7018 1830 0000 8887 8032

U.S. Postal Service™
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 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

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	\$

Postmark Here

Postage \$
 Total \$
 Sent \$
 State
 City

MARSHALL & WINSTON INC
PO BOX 50880
MIDLAND TX 79701

1774-SMITH RANCH SWD #1

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

**SHACKLEFORD OIL CO
PO BOX 10665
MIDLAND TX 79702**

1774-SMITH RANCH SWD #1



9590 9402 4057 8079 2009 29

2. Article Number (Transfer from service label)

7018 1830 0000 8887 8049

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

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
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL®



7018 1830 0000 8887 8049
7018 1830 0000 8887 8049

**U.S. Postal Service™
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For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee

\$

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

- Return Receipt (hardcopy) \$ _____
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postmark
Here

Postage

\$

Total P

\$

Sent To

Street:

City, St:

**SHACKLEFORD OIL CO
PO BOX 10665
MIDLAND TX 79702**

1774-SMITH RANCH SWD #1

PS Form 3800, April 2015 PSN 7530-02-000-9347

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> 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. 	<p>A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p>																
<p>1. Article Addressed to:</p> <p style="text-align: center;">CHISHOLM ENERGY OPERATING LLC 801 CHERRY STREET FT WORTH TX 76102</p> <p style="text-align: center;">1774-SMITH RANCH SWD #1</p>  <p style="text-align: center;">9590 9402 4057 8079 2009 36</p>	<p>D. Is delivery address different from Item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>																
<p>2. Article Number (Transfer from service label)</p> <p style="text-align: center;">7018 1830 0000 8887 8056</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input checked="" type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input checked="" type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>	<p style="text-align: right;">Domestic Return Receipt</p>																

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OFFICIAL USE

<p>Certified Mail Fee \$ _____</p> <p>Extra Services & Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$ _____</p> <p><input type="checkbox"/> Return Receipt (electronic) \$ _____</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$ _____</p> <p><input type="checkbox"/> Adult Signature Required \$ _____</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$ _____</p> <p>Postage \$ _____</p> <p>Total \$ _____</p> <p>Sent _____</p> <p>Sent _____</p> <p>City, _____</p>	<p>Postmark Here</p>
<p>CHISHOLM ENERGY OPERATING LLC 801 CHERRY STREET FT WORTH TX 76102</p> <p>1774-SMITH RANCH SWD #1</p>	
<p style="font-size: x-small;">PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions</p>	

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL®



7018 1830 0000 8887 8056

7018 1830 0000 8887 8056

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:

**BTA OIL PRODUCERS LLC
104 S PECOS
MIDLAND TX 79701**

1774-SMITH RANCH SWD #1



9590 9402 4057 8079 2009 43

2 Article Number (Transfer from envelope label)

7018 1830 0000 8887 8063

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

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
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

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

Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.
CERTIFIED MAIL®



7018 1830 0000 8887 8063
7018 1830 0000 8887 8063

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$ _____

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

- Return Receipt (hardcopy) \$ _____
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Tot \$ _____

Sei \$ _____

Str _____

City _____

**BTA OIL PRODUCERS LLC
104 S PECOS
MIDLAND TX 79701**

1774-SMITH RANCH SWD #1

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Postmark Here

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:

OCCIDENTAL PERMIAN LP
5 E GREENWAY PLAZA #110
HOUSTON TX 77046

1774-SMITH RANCH SWD #1



9590 9402 4057 8079 2009 50

2. Article Number (Transfer from service label)

7018 1830 0000 8887 8070

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

- 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
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

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

Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL®



7018 1830 0000 8887 8070
7018 1830 0000 8887 8070

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Domestic Mail Only

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OFFICIAL USE

Certified Mail Fee

\$

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

- Return Receipt (hardcopy) \$ _____
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postmark
Here

Postage

\$

Total P

\$

Sent To

Street:

City, St

OCCIDENTAL PERMIAN LP
5 E GREENWAY PLAZA #110
HOUSTON TX 77046

1774-SMITH RANCH SWD #1

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

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

1774-SMITH RANCH SWD #1



9590 9402 4057 8079 2009 67

2. Article Number (Transfer from service label)
7018 1830 0000 8887 8087

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Agent
 Addressee

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

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

3. Service Type
- | | |
|--|---|
| <input checked="" type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL®



7018 1830 0000 8887 8087
 7018 1830 0000 8887 8087

U.S. Postal Service™
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 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

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	\$ _____

Postmark Here

MAGNUM HUNTER PRODUCTION INC
202 S CHEYENNE AVE STE 1000
TULSA OK 74103

1774-SMITH RANCH SWD #1

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

UNION OIL CO OF CALIF
PO BOX 2100
HOUSTON TX 77210

1774-SMITH RANCH SWD #1



9590 9402 4057 8079 2009 74

2. Article Number (Transfer from service label)

7018 1830 0000 8887 8094

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

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
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

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7018 1830 0000 8887 8094

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Domestic Mail Only

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OFFICIAL USE

Certified Mail Fee

\$

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

- Return Receipt (hardcopy) \$ _____
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postmark
Here

Postage

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Tr
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St
\$
St
Ci

UNION OIL CO OF CALIF
PO BOX 2100
HOUSTON TX 77210

1774-SMITH RANCH SWD #1

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

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:

MAGNUM HUNTER PRODUCTION INC
600 N MARIENFELD ST, STE 600
MIDLAND TX 79701

1774-SMITH RANCH SWD #1



9590 9402 4057 8079 2009 81

2. Article Number (Transfer from service label)

7018 1830 0000 8887 8100

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

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
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee

- \$ _____
- Extra Services & Fees (check box, add fee as appropriate)
- Return Receipt (hardcopy) \$ _____
 - Return Receipt (electronic) \$ _____
 - Certified Mail Restricted Delivery \$ _____
 - Adult Signature Required \$ _____
 - Adult Signature Restricted Delivery \$ _____

Postmark
Here

Postage

\$ _____

Total P: \$ _____

Sent To _____

Street a _____

City, St _____

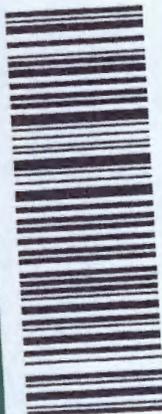
MAGNUM HUNTER PRODUCTION INC
600 N MARIENFELD ST, STE 600
MIDLAND TX 79701

1774-SMITH RANCH SWD #1

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.
CERTIFIED MAIL®



7018 1830 0000 8887 8100
7018 1830 0000 8887 8100

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:

**DEVON ENERGY PRODUCTION CO. LP
333 W SHERIDAN AVE
OKLAHOMA CITY OK 73102**

1774-SMITH RANCH SWD #1



9590 9402 4057 8079 2009 98

2 Article Number (transfer from service label)

7018 1830 0000 8887 8117

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

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
- Insured Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

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

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL®



7018 1830 0000 8887 8117
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**DEVON ENERGY PRODUCTION CO. LP
333 W SHERIDAN AVE
OKLAHOMA CITY OK 73102
1774-SMITH RANCH SWD #1**

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

LONQUIST & CO. LLC

AUSTIN
HOUSTON

PETROLEUM
ENGINEERS

ENERGY
ADVISORS

WICHITA
CALGARY

www.lonquist.com

January 24, 2019

BTA Oil Producers, LLC
104 S Pecos
Midland, TX 79701

Subject: Smith Ranch SWD No. 1 Authorization to Inject

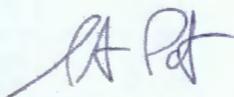
To Whom It May Concern:

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Any questions should be directed towards 3Bear Field Services LLC's agent, Lonquist & Co., LLC.

Regards,



Stephen L. Pattee, P.G.
Regulatory Manager
Lonquist & Co., LLC

(512) 600-1774
steve@lonquist.com

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January 24, 2019

Chisholm Energy Operating, LLC
801 Cherry Street
Fort Worth, TX 76102

Subject: Smith Ranch SWD No. 1 Authorization to Inject

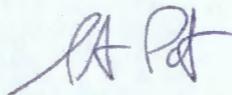
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January 24, 2019

Cimarex Energy Co. of Colorado
202 S. Cheyenne Ave. Suite 1000
Tulsa, OK 74102

Subject: Smith Ranch SWD No. 1 Authorization to Inject

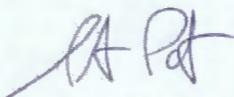
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January 24, 2019

COG Operating LLC
550 W Texas
Midland, TX 79701

Subject: Smith Ranch SWD No. 1 Authorization to Inject

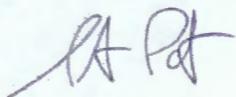
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January 24, 2019

Devon Energy Production Company, LP
333 W. Sheridan Avenue
Oklahoma City, OK 73102

Subject: Smith Ranch SWD No. 1 Authorization to Inject

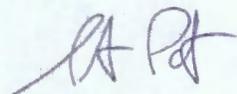
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steve@lonquist.com

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January 24, 2019

Kenneth Smith Inc.
207 Smith Ranch Rd.
Hobbs, NM 88240

Subject: Smith Ranch SWD No. 1 Authorization to Inject

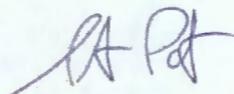
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Lonquist & Co., LLC

(512) 600-1774
steve@lonquist.com

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January 24, 2019

Magnum Hunter Production Inc.
600 N Marienfeld Street, Suite 600
Midland, TX 79701

Subject: Smith Ranch SWD No. 1 Authorization to Inject

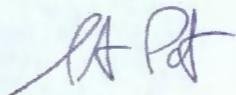
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January 24, 2019

Magnum Hunter Production Inc
202 S. Cheyenne Ave. Suite 1000
Tulsa, OK 74102

Subject: Smith Ranch SWD No. 1 Authorization to Inject

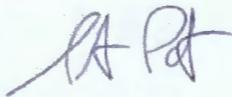
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Lonquist & Co., LLC

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steve@lonquist.com

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January 24, 2019

Marshall & Winston Inc.
PO Box 50880
Midland, TX 79701

Subject: Smith Ranch SWD No. 1 Authorization to Inject

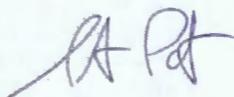
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steve@lonquist.com

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www.lonquist.com

January 24, 2019

Occidental Permian LP
5 E Greenway Plaza #110
Houston, TX 77046

Subject: Smith Ranch SWD No. 1 Authorization to Inject

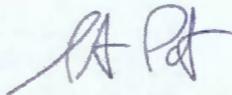
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January 24, 2019

OIL CONSERVATION DIVISION
DISTRICT I
1625 N FRENCH DRIVE
HOBBS, NM 88240

Subject: Smith Ranch SWD No. 1 Authorization to Inject

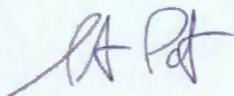
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steve@lonquist.com

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ADVISORS

WICHITA
CALGARY

www.lonquist.com

January 24, 2019

Shackleford Oil Co.
PO Box 10665
Midland, TX 79702

Subject: Smith Ranch SWD No. 1 Authorization to Inject

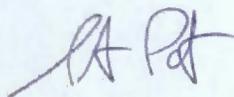
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www.lonquist.com

January 24, 2019

Union Oil Co. of Calif
PO Box 2100
Houston, TX 77210

Subject: Smith Ranch SWD No. 1 Authorization to Inject

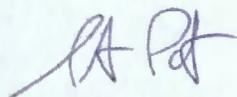
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Regards,



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Regulatory Manager
Lonquist & Co., LLC

(512) 600-1774
steve@lonquist.com

APPLICATION FOR AUTHORIZATION TO INJECT

- I. PURPOSE: _____ Secondary Recovery _____ Pressure Maintenance X Disposal _____ Storage
Application qualifies for administrative approval? X Yes _____ No
- II. OPERATOR: 3Bear Field Service, LLC
ADDRESS: 415 W. Wall St., Suite 1212
CONTACT PARTY: Kevin Burns PHONE: 432-686-2973
- 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 X No
If yes, give the Division order number authorizing the project: _____
- 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.
- VII. Attach data on the proposed operation, including:
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: Ramona Hovey TITLE: Consulting Engineer – Agent for 3Bear Field Service
SIGNATURE: Ramona Hovey DATE: 1/24/2019
E-MAIL ADDRESS: ramona@lonquist.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.

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.

Side 1

INJECTION WELL DATA SHEET

OPERATOR: 3Bear Field Services, LLC

WELL NAME & NUMBER: Smith Ranch SWD No. 1

WELL LOCATION: 358 FNL 2,362 FEL
FOOTAGE LOCATION

A
UNIT LETTER

35
SECTION

19S
TOWNSHIP

33E
RANGE

WELLBORE SCHEMATIC

WELL CONSTRUCTION DATA

Surface Casing

Hole Size: 26.000"

Casing Size: 20.00"

Cemented with: 2,515 sx.

or _____ ft³

Top of Cement: surface

Method Determined: circulation

1st Intermediate Casing

Hole Size: 17.500"

Casing Size: 13.375"

Cemented with: 2,140 sx.

or _____ ft³

Top of Cement: surface

Method Determined: circulation

2nd Intermediate Casing

Hole Size: 12.250"

Casing Size: 9.625"

Cemented with: 2,555 sx.

or _____ ft³

Top of Cement: surface

Method Determined: circulation

Production Liner

Hole Size: 8.750"

Casing Size: 7.625"

Cemented with: 365 sx.

or _____ ft³

Top of Cement: 10,630'

Method Determined: calculation

Total Depth: 15,800'

Injection Interval

14,471' feet to 15,800' feet

(Open Hole)

INJECTION WELL DATA SHEET

Tubing Size: 5.5", 20 lb/ft, HCN-80, BTC from 0' - 14,421'

Lining Material: Duoline

Type of Packer: 7-5/8" X 5-1/2" Permanent Packer with High Temp Elastomer and Full Inconel 925 trim

Packer Setting Depth: 14,421'

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

Additional Data

1. Is this a new well drilled for injection? X Yes _____ No

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

2. Name of the Injection Formation: Devonian, Fusselman, Montoya

3. Name of Field or Pool (if applicable): SWD; Devonian-Silurian 97869

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, new drill.

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

Delaware: 5,350'

Bone Spring: 8,120'

Wolfcamp: 10,800'

Strawn: 12,060'

Atoka: 12,330'

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720

District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170

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

State of New Mexico
Energy Minerals and Natural Resources
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-101
Revised July 18, 2013

MOE-3 OCD
NOV 29 2018
RECEIVED

AMENDED REPORT

F/P

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator Name and Address 3BEAR FIELD SERVICES, LLC 1512 LARIMER ST., SUITE 540 DENVER, CO 80202		² OGRID Number 372603
³ Property Code <i>722 248</i>		⁴ API Number <i>30-025-44390</i>
⁵ Property Name SMITH RANCH SWD		⁶ Well No. 1

7. Surface Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County
A	35	19S	33E		358	NORTH	2362	EAST	LEA

8. Proposed Bottom Hole Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County

9. Pool Information

Pool Name SWD; DEVONIAN-SILURIAN	Pool Code 97869
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Additional Well Information

¹¹ Work Type N	¹² Well Type S	¹³ Cable/Rotary R	¹⁴ Lease Type <i>S F</i>	¹⁵ Ground Level Elevation <i>3253 3595</i>
¹⁶ Multiple YES	¹⁷ Proposed Depth 15,800'	¹⁸ Formation SILURO-DEVONIAN	¹⁹ Contractor JDC DRILLING	²⁰ Spud Date UPON APPROVAL OF C-108
Depth to Ground water 110'		Distance from nearest fresh water well 2963'		Distance to nearest surface water 11,600 (LAGUNA TONTO)

We will be using a closed-loop system in lieu of lined pits

21. Proposed Casing and Cement Program

Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
SURF	26"	20.0"	94# J-55	1400	2515	0
INTER	17.5	13.375"	54.5# J-55	3050	2140	0
<i>PROD</i> INTER-2	12.25"	9.625"	40# L-80 HC	10880	2555	0

Casing/Cement Program: Additional Comments

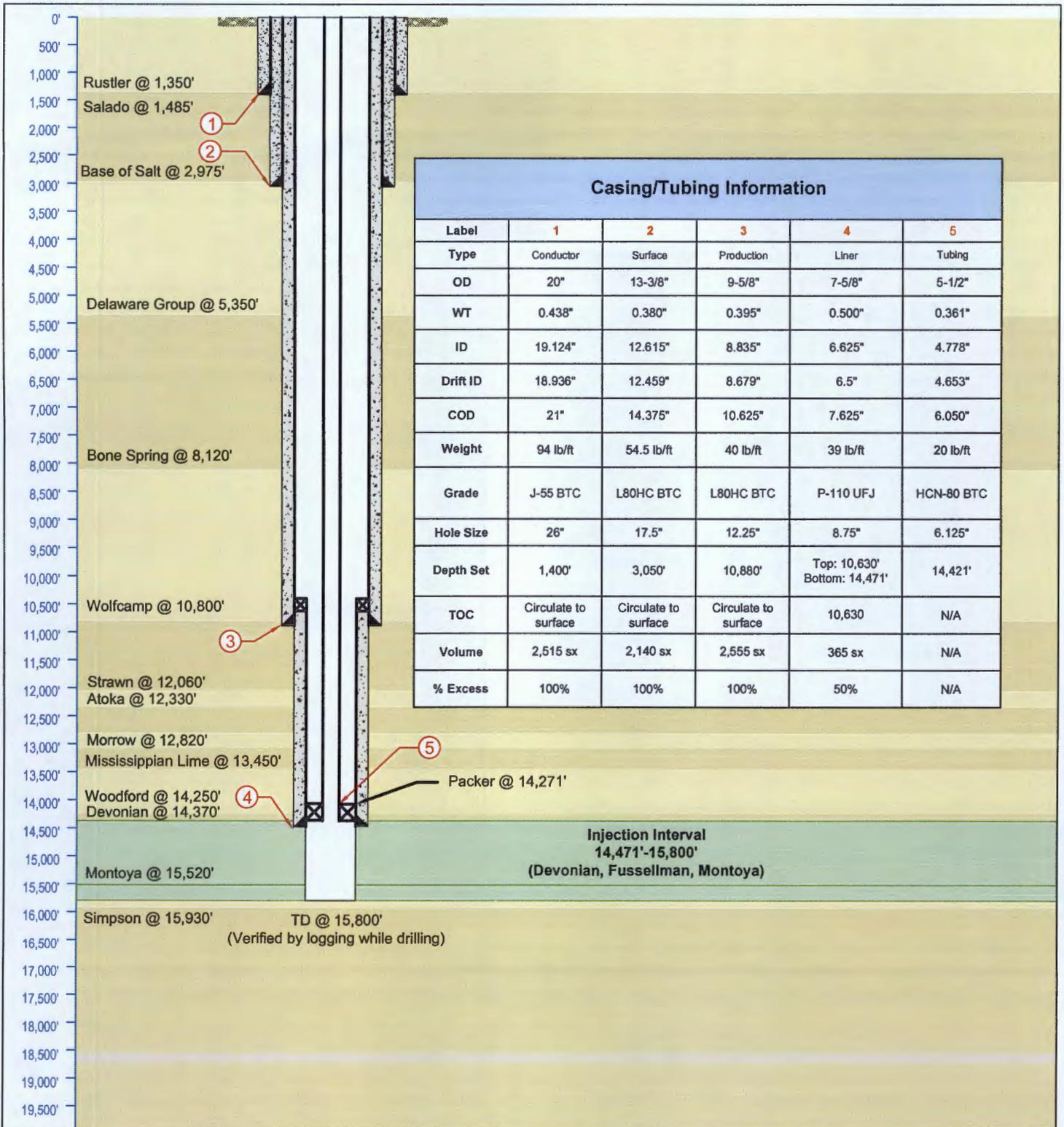
LINER/8.75"/7.625"/39# P-110 UFJ/14471/365 SXS/TOC @ 10630'; OPEN HOLE FROM 1400'-15800'; PLEASE SEE ATTACHED WBD

22. Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
	SEE ATTACHMENT		

²³ I hereby certify that the information given above is true and complete to the best of my knowledge and belief. I further certify that I have complied with 19.15.14.9 (A) NMAC <input checked="" type="checkbox"/> and/or 19.15.14.9 (B) NMAC <input checked="" type="checkbox"/> if applicable. Signature: <i>Jennifer Elrod</i> Printed name: JENNIFER ELROD Title: SR. REGULATORY TECH E-mail Address: jelrod@chisholmenergy.com Date: 11/29/2018	OIL CONSERVATION DIVISION	
	Approved By: <i>[Signature]</i>	
	Title: Petroleum Engineer	
	Approved Date: <i>12/04/18</i>	Expiration Date: <i>12/04/20</i>
	Conditions of Approval Attached	

See Attached
Conditions of Approval



LONQUIST & CO. LLC PETROLEUM ENGINEERS ENERGY ADVISORS HOUSTON CALGARY AUSTIN WICHITA DENVER	3Bear Field Services, LLC	Smith Ranch SWD No. 1	
	Country: USA	State/Province: New Mexico	County/Parish: Lea
Location:	Site: 358 FNL, 2,362 FEL	Survey: S35-T19S-R33E	
API No: N/A	Field:	Well Type/Status: SWD	
Texas License F-9147	NMOCD District No: 1	Project No:	Date: 01/23/2019
12912 Hill Country Blvd. Ste F-200 Austin, Texas 78738 Tel: 512.732.9812 Fax: 512.732.9816	Drawn: TFM	Reviewed:	Approved:
	Rev No: 1	Notes:	



3Bear Field Services, LLC

Smith Ranch SWD No. 1

FORM C-108 Supplemental Information

III. Well Data

A. Wellbore Information

1.

Well information	
Lease Name	Smith Ranch SWD
Well No.	1
Location	S-35 T-19S R-33E
Footage Location	358' FNL & 2,362' FEL

2.

a. Wellbore Description

Casing Information				
Type	Surface	Intermediate	Production	Liner
OD	20"	13.375"	9.625"	7.625"
WT	0.438"	0.38"	0.395"	0.500"
ID	19.124"	12.615"	8.835"	6.625"
Drift ID	18.936"	12.459"	8.679"	6.500"
COD	21"	14.375"	10.625"	7.625"
Weight	94 lb/ft	54.5 lb/ft	40 lb/ft	39 lb/ft
Grade	J-55 BTC	L80HC BTC	L80HC BTC	P-110 UFJ
Hole Size	26"	17.5"	12.25"	8.75"
Depth Set	1,400'	3,050'	10,880'	10,630'-14,471'

b. Cementing Program

Cement Information				
Casing String	Conductor	Intermediate	Intermediate 2	Liner
Lead Cement	Class C	Class C	Class H	
Lead Cement Volume	1,620 sks	1,485 sks	1,575 sks	
Lead Cement Density	12.2 ppg	12.7 ppg	12.7 ppg	
Tail Cement	Class C	Class C	Class H	Class H
Tail Cement Volume	895 sks	655 sks	980 sks	365 sks
Tail Cement Density	14.8 ppg	14.8 ppg	14.5 ppg	14.5 ppg
Cement Excess	100%	100%	100%	50%
TOC	Surface	Surface	Surface	10,630'
Method	Circulate to Surface	Circulate to Surface	Circulate to Surface	Logged

3. Tubing Description

Tubing Information	
OD	5.5"
WT	0.361"
ID	4.778"
Drift ID	4.653
COD	6.050"
Weight	20 lb/ft
Grade	HCN-80 BTC
Depth Set	0-14,421'

Tubing will be lined with Duoline.

4. Packer Description

7-5/8" x 5-1/2" TCPC Permanent Packer with High Temp Elastomer and Full Inconel 925 trim

B. Completion Information

1. Injection Formation: Devonian, Silurian, Fusselman, Montoya

2. Gross Injection Interval: 14,471'-15,800'

Completion Type: Open Hole

3. Drilled for injection.
4. See the attached wellbore schematic.
5. Oil and Gas Bearing Zones within area of well:

Formation	Depth
Delaware	5,350'
Bone Spring	8,120'
Wolfcamp	10,800'
Strawn	12,060'
Atoka	12,330'

VI. Area of Review

No wells within the area of review penetrate the proposed injection zone.

VII. Proposed Operation Data

1. Proposed Daily Rate of Fluids to be Injection:

Average Volume: 20,000 BPD
Maximum Volume: 25,000 BPD

2. Closed System
3. Anticipated Injection Pressure:

Average Injection Pressure: 2,156 PSI (surface pressure)
Maximum Injection Pressure: 2,874 PSI (surface pressure)

4. The injection fluid is to be locally produced water. It is expected that the source water will predominantly be from the Bone Spring and Wolfcamp formations. Attached are produced water sample analyses taken from the closest wells that feature samples from the Bone Spring, Wolfcamp, Artesia, Pennsylvanian, San Andreas, and Delaware formations.
5. The disposal interval is non-productive. No water samples are available from the surrounding area.

VIII. Geological Data

Devonian Formation Lithology:

The Devonian formation is a dolomitic ramp carbonate that occurs below the Woodford shale and above the Fusselman formation. Strata found in the Devonian formation include two major groups, the Wristen Buildups and the Thirtyone Deepwater Chert, with the Wristen being more abundant. The Wristen Groups is composed of mixed limestone and dolomites with mudstone to grainstone and boundstone textures. Porosity in the Wristen group is a result of both primary and secondary development. Present are moldic, vugular, karstic (including collapse breccia) features that allow for higher porosities and permeabilities. The Thirtyone Formation contains two end-member reservoir facies, skeletal packstones/grainstones and spiculitic chert, with most of the porosity and permeability found in the coarsely crystalline cherty dolomite. These particular characteristics allow for this formation to be a tremendous Salt Water Disposal horizon.

Fusselman Formation Lithology:

The Silurian/Ordovician Fusselman Formation is stratigraphically below the Wristen Group and is above and separated from the Montoya Formation by the Sylvan Shale. The Sylvan Shale is the lower confining layer for the proposed Smith Ranch SWD No. 1 well. Fusselman facies include a laminated skeletal wackestone in the upper part and a buildup complex in the lower part composed of ooid and bryozoan grainstones. These grainstones can also be potentially prolific zones for disposal.

Montoya Formation Lithology:

The Montoya Group of Late Ordovician age unconformably overlies the Simpson Group. The Montoya is composed of light gray to medium-dark gray, fine- to medium-crystalline, calcareous dolomite, some units of which are interbedded with shale or dark-gray limestone and some units of which contain white to very light-gray chert. The Montoya carbonate limestone dolomite sequence is dense, impermeable, and non-porous.

A. Injection Zone: Siluro-Devonian Formation

Formation	Depth
Rustler	1,350'
Salado	1,485'
Delaware	5,350'
Bone Spring	8,120'
Wolfcamp	10,800'
Strawn	12,060'
Atoka	12,330'
Morrow	12,820'
Barnett	13,070'
Mississippian Lime	13,450'
Woodford	14,250'
Devonian	14,370'
Montoya	15,520'
Simpson	15,930'

B. Underground Sources of Drinking Water

One water well exists within one mile of the proposed well. Across the area, fresh water wells are usually drilled between 50' and 850' in depth. The Rustler is known to exist in this general area and may also be another USDW and will be protected through the top of the Salado Formation at 1,485' by setting surface casing at 1,400' and intermediate casing at 3,050' below the Salado.

IX. Proposed Stimulation Program

No stimulation program planned.

X. Logging and Test Data on the Well

There are no logs or test data on the well. During the process of drilling and completion resistivity, gamma ray, and density logs will be run.

XI. Chemical Analysis of Fresh Water Wells

Attached is a map of the one (1) water well that exist within one mile of the well location. Samples from the well have been obtained and analysis results will be provided as soon as possible. A Water Right Summary from the New Mexico Office of the State Engineer is attached for water well CP-00658-POD1.