

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88241-1980  
DISTRICT II  
811 S. First St., Artesia, NM 88210-2835  
DISTRICT III  
1000 Rio Brazos Rd, Aztec, NM 87410-1693

State of New Mexico  
Energy, Minerals and Natural Resources Department

NOV 24 1997

OIL CONSERVATION DIVISION

2040 S. Pacheco  
Santa Fe, New Mexico 875054-6429

Form C-107-A  
New 3-12-96

APPROVAL PROCESS:

☒ Administrative ☐ Hearing

EXISTING WELLBORE

☒ YES ☐ NO

APPLICATION FOR DOWNHOLE COMMINGLING

BURLINGTON RESOURCES OIL & GAS COMPANY  
Operator

P.O. Box 51810 Midland, TX 79710-1810  
Address

REDCHECKER 14 FEDERAL  
Lease

1  
Well No.

P 14  
Unit Ltr. - Sec - Twp - Rge

T22S

R32E

LEA

County

OGRID NO. 26485

Property Code 16212

API NO. 30-025-32764

Spacing Unit Lease Types: (check 1 or more)  
Federal ☒ State ☐ (and/or) Fee ☐

The following facts are submitted in support of downhole commingling:	Upper Zone	Intermediate Zone	Lower Zone
1. Pool Name and Pool Code	WEST RED TANK DELAWARE 51689		RED TANK BONE SPRING 51683
2. Top and Bottom of Pay Section (Perforations)	4958' - 4966' 8490' - 8518'		9830' - 9860'
3. Type of production (Oil or Gas)	OIL		OIL
4. Method of Production (Flowing or Artificial Lift)	ARTIFICIAL LIFT		ARTIFICIAL LIFT
5. Bottomhole Pressure Oil Zones - Artificial Lift: Gas & Oil - Flowing: Estimated Current All Gas Zones: Measured Current Estimated Or Measured Original	a. (Current) 1200 PSI b. (Original) 3480 PSI	a.  b.	a. 2087 b. 3900 PSI EST.
6. Oil Gravity (°API) or Gas BTU Content)	40 DEG		40 DEG
7. Producing or Shut-In?	PROD.		TO BE COMPLETED
Production Marginal? (yes or no)	Yes		Yes
* If Shut-In, give date and oil/gas/water rates of last production Note: For new zones with no production history, applicant shall be required to attach production estimates and supporting data	Date: Rates:	Date: Rates:	Date: Rates:
* If Producing, give date and oil/gas/water rates of recent test (within 60 days)	Date: 10-20-97 Rates: 14 BOPD, 24 BWP, 40 MCFPD	Date: Rates:	Date: TO BE COMPLETED Rates: SEE ATTACHED
8. Fixed Percentage Allocation Formula - % for each zone	Oil: 65 % Gas: 70 %	Oil: % Gas: %	Oil: 35 % Gas: 30 %

9. If allocation formula is based upon something other than current or past production, or is based upon some other method, submit attachments with supporting data and/or explaining method and providing rate projections or other required data.

10. Are all working, overriding, and royalty interests identical in all commingled zones?  
If not, have all working, overriding, and royalty interests been notified by certified mail?  
Have all offset operators been given written notice of the proposed downhole commingling?

☒ Yes ☐ No  
☐ Yes ☐ No  
☒ Yes ☐ No

11. Will cross-flow occur? Yes ☒ No ☐ If yes, are fluids compatible, will the formations not be damaged, will any cross-flowed production be recovered, and will the allocation formula be reliable. Yes ☐ No ☐ (If No, attach explanation)

12. Are all produced fluids from all commingled zones compatible with each other? ☒ Yes ☐ No

13. Will the value of production be decreased by commingling? Yes ☐ No ☒ (If Yes, attach explanation)

14. If this well in on, or communitized with, state or federal lands, either the Commissioner of Public Lands or the United States Bureau of Land Management has been notified in writing of this application. ☒ Yes ☐ No

15. NMOC Reference Cases for Rule 303(D) Exceptions: ORDER NO(S) \_\_\_\_\_

16. ATTACHMENTS:

- \* C-102 for each zone to be commingling showing its spacing unit and acreage dedication.
- \* Production curve for each zone for at least one year. (If not available, attach explanation.)
- \* For zones with no production history, estimated production rates and supporting data.
- \* Data to support allocation method or formula.
- \* Notification list of all offset operators.
- \* Notification list of working, overriding, and royalty interests for uncommon interest cases.
- \* Any additional statements, data, or documents required to support commingling.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

*Maria L. Perez*

TITLE REGULATORY REP.

DATE 11-19-97

TYPE OR PRINT NAME MARIA L. PEREZ

TELEPHONE NO. ( 915 ) 688-6906

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District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

Form C-102  
Revised October 18, 1994  
Instructions on back  
Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> API Number 30-025-32764	<sup>2</sup> Pool Code 51683	<sup>3</sup> Pool Name RED TANK BONE SPRING
<sup>4</sup> Property Code 16212	<sup>5</sup> Property Name REDCHECKER 14 FEDERAL	<sup>6</sup> Well Number 1
<sup>7</sup> OGRID No. 26485	<sup>8</sup> Operator Name BURLINGTON RESOURCES OIL & GAS COMPANY	<sup>9</sup> Elevation 3742'

<sup>10</sup> Surface Location

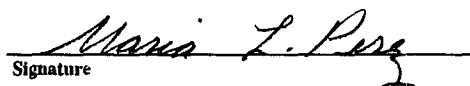

UL or lot no. P	Section 14	Township 22S	Range 32E	Lot. Idn	Feet from the 330'	North/South Line SOUTH	Feet from the 990'	East/West line EAST	County LEA
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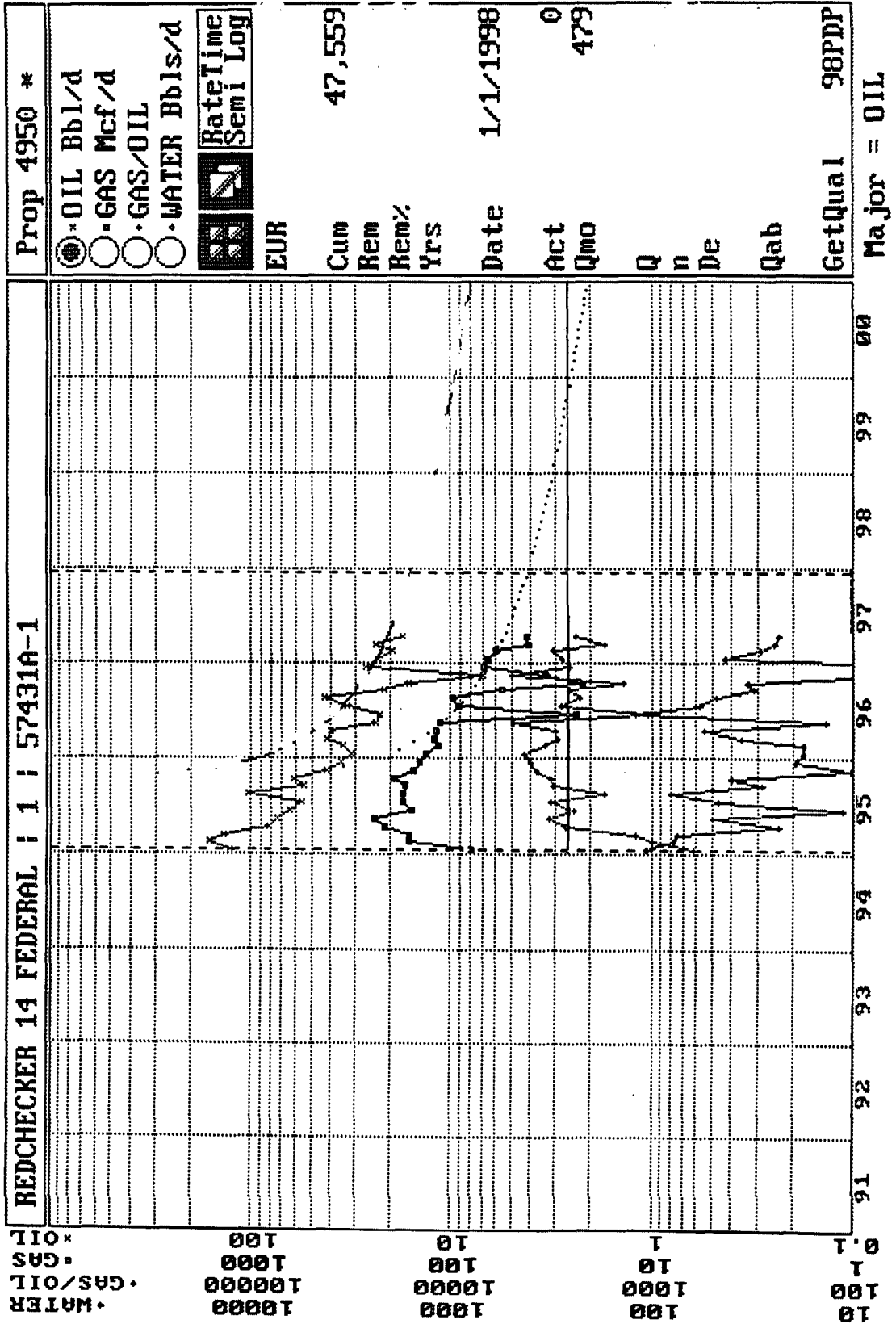
<sup>11</sup> Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
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<sup>12</sup> Dedicated Acres 40	<sup>13</sup> Joint or Infill	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED  
OR A NON--STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

				<sup>17</sup> OPERATOR CERTIFICATION <i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</i>   Signature MARIA L. PEREZ Printed Name REGULATORY REPRESENTATIVE Title 11-19-97 Date
				<sup>18</sup> SURVEYOR CERTIFICATION <i>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.</i>  Date of Survey Signature and Seal of Professional Surveyer:  
				Certificate Number



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WATER

10000

1000

100

10

